



REGISTRATION FORM

Full Name: _____ Date of Birth: _____

Home Address: _____

Cell Phone: _____ Email Address: _____

High School: _____ 1st year College Student Rising H.S. Senior

Expected College: _____

Mother's Name: _____ Mother's Cell: _____

Father's Name: _____ Father's Cell: _____

Emergency Contact (Name/Phone Number): _____

- Payment Method: Check made payable to Melinda S. Harper, Ph.D. (sent via U.S. mail to 417-A S. Sharon Amity Road, Charlotte, NC 28211)
- Credit Card or Check via uBack app*
- Web form*: <http://bit.ly/T2Usession>
(*processing fees apply)



Consent to Participate

I, _____, consent to participate in the Transitions to University (T2U) High School Seminar. I understand that the purpose of this seminar is to facilitate my transition from the high school setting to university life. I understand that this seminar will be conducted by Dr. Melinda Harper, and when appropriate, advanced-level upper-class university students. I understand that my participation and discussion will be kept confidential. I understand that the information presented in this one-day seminar is solely the intellectual property of Dr. Melinda Harper and the T2U Program. I understand that I can contact Dr. Harper (c: 704-649-8182; mharperphd@gmail.com) for more general information and to answer any questions I may have about the T2U high school seminar. I understand that I may revoke this consent to participate in the T2U High School Seminar at any time by notifying Dr. Harper of my decision.

Signature (Parent if not 18) _____ Date _____

Printed name _____