

## **UTC All East Workshop Registration Form**

Student Name \_\_\_\_\_ Student Email \_\_\_\_\_

Student year in School \_\_\_\_\_ Student voice part \_\_\_\_\_

Student's school \_\_\_\_\_ Official chaperone \_\_\_\_\_

Student's **Emergency Contact** Name \_\_\_\_\_

Student's **Emergency Contact** Phone Number \_\_ (\_\_\_\_) \_\_\_\_\_

Does the student have any allergies or physical or medical conditions that would require accommodation? Y / N If so, please list them \_\_\_\_\_

*In case of Emergency, campus police number is (423)-425-4357*

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