Dr. Millard & Ruth Harmon
Student Leader Conference
August 21-23, 2012

Sign up Sheets are due by 4:30pm on Friday, April 27, 2012

Sheets may be turned into Julie Dold at the Campus Life Office, 208 Barrington Student Union or at doldjm@potsdam.edu.

Space is limited and priority will be given to allow at least one representative from all student leadership groups to participate, provided that their sign-up sheets are submitted on time. Based on space availability, as many as five representatives per group may be approved to attend. Please note that due to limited space, sign-up sheets turned in after the deadline may not be accepted.

Organization Name: _____

We would like to have the following student be our group's representative at the conference:

1. Student Name: _____

Email: _____

Position within Organization: _____

Campus Address: _____

Summer Address: _____

Phone: _____

Can we reach you at this number during the summer?
- ☐ Yes
- ☐ No – Please provide a number at which we can reach you during the summer: _____

Special Meal Needs (vegetarian, food allergies, etc): _____

Will you live on campus during the Fall 2012 semester?
- ☐ Yes
- ☐ No

If space permits, we would also like the following students from our group to attend the conference.
Please note that no more than 5 students total will be approved from your group. In addition, the order in which you list them will be the order in which they are approved.

2. Student Name: _____

Email: _____

Position within Organization: _____

Campus Address: _____

Summer Address: _____

Phone: _____

Can we reach you at this number during the summer?
- ☐ Yes
- ☐ No – Please provide a number at which we can reach you during the summer: _____

Special Meal Needs (vegetarian, food allergies, etc): _____

Will you live on campus during the Fall 2012 semester?
- ☐ Yes
- ☐ No

3. Student Name: _____

Email: _____

Position within Organization: _____

Campus Address: _____

Summer Address: _____

Phone: _____

Can we reach you at this number during the summer?
- ☐ Yes
- ☐ No – Please provide a number at which we can reach you during the summer: _____

Special Meal Needs (vegetarian, food allergies, etc): _____

Will you live on campus during the Fall 2012 semester?
- ☐ Yes
- ☐ No

4. Student Name: _____

Email: _____

Position within Organization: _____

Campus Address: _____

Summer Address: _____

Phone: _____

Can we reach you at this number during the summer?
- ☐ Yes
- ☐ No – Please provide a number at which we can reach you during the summer: _____

Special Meal Needs (vegetarian, food allergies, etc): _____

Will you live on campus during the Fall 2012 semester?
- ☐ Yes
- ☐ No

5. Student Name: _____

Email: _____

Position within Organization: _____

Campus Address: _____

Summer Address: _____

Phone: _____

Can we reach you at this number during the summer?
- ☐ Yes
- ☐ No – Please provide a number at which we can reach you during the summer: _____

Special Meal Needs (vegetarian, food allergies, etc): _____

Will you live on campus during the Fall 2012 semester?
- ☐ Yes
- ☐ No