

**ROOMMATE PREFERENCE
FORM MUST BE RETURNED NO LATER THAN
March 14, 2018**

Name: _____ **Phone:** _____

Every effort will be made to assign at least one of the names listed below to your room pending administrative approval. Please include **3 choices and your name**. Rooming assignments are based on 4 students to a room. Forms without choices or forms received after March 14 will be assigned where space is available. Information will be respected and held confidential. Students & chaperones will be notified of roommate assignments 1-2 weeks before our departure.

All roommate and bus assignments will be final.

ROOMMATE CHOICES

WRITE NEATLY AND SPELL NAMES CORRECTLY

Roommate 1 (MY NAME)	
Roommate 2	
Roommate 3	
Roommate 4	

(Student Signature, required)

(Parent Signature, required)

* EACH ROOM WILL HAVE FOUR STUDENTS. IF YOU ONLY LIST THREE PEOPLE, WE CANNOT GUARANTEE THAT YOUR GROUP OF THREE WILL NOT BE SPLIT UP.



**STAPLE ALL FORMS
FOR YOUR GROUP TOGETHER AND
TURN IN AT ONE TIME.**