



MILLIKIN UNIVERSITY®

OFFICE OF RESIDENCE LIFE

OVERNIGHT GUEST REGISTRATION FORM

1184 West Main Street
Decatur, Illinois 62522

☎ 217.362.6410
☎ 217.424.3706
www.millikin.edu

Welcome to your overnight stay at Millikin University! We are pleased to welcome you into our residential facilities on campus, and hope you receive positive confirmation about living in a community at Millikin. Please take a moment to fill out this registration form that will be stored in the Office of Residence Life in the case we need to contact your family for an unforeseen emergency while you are on campus.

By reading and signing this form, you, and your host, are expected to follow all state laws and Millikin University policies (www.millikin.edu/student-development/student-handbook). It is the intention of the undersigned to exempt and relieve Millikin University and Associated Parties from any liability for personal injury, property damage, or death caused by negligence. If you have any immediate needs please contact security at 217-464-8888.

I have carefully read this agreement and fully understand its contents. I am aware that this is a release of liability between myself and Millikin University and its affiliates, and I sign of my own free will.

If policy is violated while you are on campus you will be asked to leave, and your admission status could be affected.

Guest Information:

Name: _____ Cell Phone: _____

Birthdate: _____ High School: _____

Parent/Guardian: _____ Cell Phone: _____

Insurance Company: _____ Visiting Program: _____

Guest Signature: _____ Date: _____

(Students under 18 years old)

Guardian Signature: _____ Date: _____

Host Information:

Name: _____ ID#: _____

Cell Phone: _____ Campus Address: _____

Birthdate: _____

Host Signature: _____ Date: _____

OFFICE USE ONLY:

COPIES SENT TO: OFFICE OF RESIDENCE LIFE

PUBLIC SAFETY