

STUDENT APPLICATION

50TH Anniversary of the Historic Bridge Crossing “**Bloody Sunday**,” March 5-8, 2015

Deadline: Application must be submitted by Friday, December 5, 2014, by 3:00 PM.

Name: _____

Address: _____

City/State: _____

Zip Code: _____

COURSES ENROLLED FALL 2014 (Must be a full-time student)

| Course Number | Course Title |
|---------------|--------------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

York College Student Club Membership(s)

Two (2) Emergency Contacts:

Name: _____ Telephone # _____

E-mail Address: _____

Name: _____ Telephone # _____

E-mail Address: _____