



RESIDENCE HALL RESERVATION

Please select your residence hall:	Morrison Hal			Iall – Women				
Please select your semester: Please select your academic level:	☐Fall ☐Freshmen	☐ Spring ☐ Sophomore	Summer Junior	Senior	Graduate			
PERSONAL DATA								
Last:	First:		Middle/I	Maiden:				
Date of birth:/	Gender:		Social Se	ecurity number:	/			
Current Address:				City:				
State/ Province:	Zip Code:		Country:					
Cell phone:	Valid Email:							
Cumulative GPA at last school atten	ded:	Major:		Minor:				
Religion:		Home churc	h:					
Make:	Model:	Color:	Licer	nse plate number:_				
Please be aware that you must register your veh	nicle with Security in add	ition to this informatio	n.					
PARENT/ GUARDIAN INFO	PRMATION							
To which parent shall we address off	icial correspondenc	e? Father	☐Mother ☐G	uardian				
Father's/ guardian name:		Cell phone:		Email:				
Mother's/ guardian name:		Cell phone:		Email:				
INSURANCE INFORMATIO	N							
☐ I have personal health insurance	Insurance Carrier:		Insuranc	e phone number:				
Policy holder's name:		Policy/ Grou	Policy/ Group number:					
Physician:		Physician's r	Physician's number:					
☐ I have, or will have WAU Student	Health Insurance							
Please list any physical conditions, all	ergies, or medicatio	ons that we should	be aware of in	case of medical em	ergency:			

Please be aware that you must complete Insurance form with Student Life in addition to this information.

EMERGENCY C	CONTACT INFORMA	TION					
Please provide two addi	itional emergency contacts of Contact #1	other than p	arent/ gua	ardian:	Contact	#2	
Name:			Name:		····		
Email:							
Cell number:			Cell nu	mber:			
ROOM INFORMA	ATION						
Floor preference: Lo	wer Level (Halcyon Hall ONLY	7)	$\square 2^{nd}$	□3 rd	Room preference:	Single* Double	
*Single rooms are ONLY as	ssigned if residence hall has space.	The single roo	om fee is 2x	s the dou	ble room fee. Freshmen are r	not eligible for a single room.	
Roommate preference name:			mail:		Number:		
Check all statements that	at apply to you:						
My roommate:			ask to touch my stuff		□always touch my stuff	☐let friends touch my stuff	
I consider myself:	serious Christian	growing Christian		☐Christian in name only	□non-Christian		
I have company:	early morning	☐at least 4times per week		☐3 times or less per week	□late night		
I clean thoroughly:	daily/ keep organized	☐3 times a week		□once per week	monthly		
I make my bed:	□daily	at least 4 day a week		at least once a week	only when I have company		
I use the radio/tv:	daily/ when sleeping	□study time		☐late night	□early morning		
My class load is:	□light	□moderate		heavy	double major		
I will bring:	□ computer	printer		☐refrigerator	□microwave		
I listen to:	□R&B/rap	□Pop/rock		☐CCM/ gospel	□variety of music		
I like it:	cold (room temperature)	hot (room temperature)		warm (room temperature	•		
T HKC II.	moderate (noise level)		_				
I am a:	morning person	night per	<i>'</i>				
Please list the athletic o	r music groups you plan to p	participate v	with:				
AGREEMENT							
be assessed to my colleg that I may question their responsibility, thus I am	all fines and charges that ar ge account. I understand that r validity. I also understand a subject to all fines and pen es and regulations of WAU	at I will be a that anythi alties for a	notified on ng that ta ctions and	f said fi kes plac l items v	nes and penalties prior to within the room in which take place in my	to their being charged so hich I reside is my room. And further, I agree	
Signature:			Da	te:	//		
Please return this form with y Washington Adventist Univer Residence Hall Reservation Halcyon Hall (Women) Morrison Hall (Men) 7600 Flower Avenue Takoma Park, MD 20912	eposit, include the student's name,	social security	number, ar	ıd "room c	leposit" on the check.		
□\$150 deposit enclosed	\$150 deposit already sent on	//					