



## GUEST REGISTRATION FORM

**SESSION:**     FALL         SPRING         SUMMER I         SUMMER II

Non-Eastern University students registering for the first time at Eastern University, or who have attended Eastern University but are not currently enrolled, must complete and submit this form.

Your registration will not be complete without a EU student ID or Social security number.

### Student Information

Full Name:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<i>Last</i>	<i>First</i>	<i>M.I.</i>	<i>Gender</i>
Address:	<input type="text"/>		<input type="text"/>	
	<i>Street Address</i>		<i>Apartment/Unit #</i>	
	<input type="text"/>	<input type="text"/>	<input type="text"/>	
	<i>City</i>	<i>State</i>	<i>ZIP Code</i>	
Home Phone:	<input type="text"/>	Cell Phone:	<input type="text"/>	
Email	<input type="text"/>			
SSN/EU ID#	<input type="text"/>			
Birth Date:	<input type="text"/>	Homeschool:	<input type="text"/>	
Emergency Contact:	<input type="text"/>			
Emergency Contact Phone:	<input type="text"/>			

### Registration

Dept	Course Number	Section Number	Title	Meeting Days	Credits
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Eastern University**  
**Office of the Registrar**  
**1300 Eagle Rd**  
**St. Davids, PA 19087**  
**610-341-5853**  
**FAX: 610-341-1707**  
**registrar@eastern.edu**