

**1. STUDENT INFORMATION:** Please use **your full legal** name and write clearly.

UCI ID#	UCI MAJOR		
LAST	FIRST	MIDDLE	
STREET	CITY	STATE	ZIP
STUDENT CELL PHONE ( )		ALTERNATE PHONE ( )	
STUDENT EMAIL (required)		ARE YOU AN INCOMING UC IRVINE FRESHMAN? <input type="checkbox"/> YES <input type="checkbox"/> NO	
BIRTHDATE	SOC SEC #	SEX <input type="checkbox"/> M <input type="checkbox"/> F	
WILL YOU BE RECEIVING UC IRVINE SUMMER FINANCIAL AID? <input type="checkbox"/> YES* <input type="checkbox"/> NO			

\*If Yes, students need to complete the 2016-2017 FAFSA and apply for UC Irvine Summer Financial Aid, 1 business day before submitting form. Visit [www.ofas.uci.edu](http://www.ofas.uci.edu)

**2. HOUSING** (optional but recommended):

Will you submit a housing contract to live in Freshman Edge housing during the program?  YES\*  NO

\*Students must apply and pay for housing via a separate housing contract. Students who mark "YES" will receive directions to apply for housing via e-mail alongside their welcome information. Housing contract and payment are **due June 30**.

**3. COURSES & FEES/PAYMENT**

**FRESHMAN EDGE COURSES:** UNI STU 83: University Success (2 units) is required and available exclusively to Freshman Edge students to help lay a solid foundation for your university success. Most students will enroll in one additional course. Keep in mind that a full load for summer session is 6-8 units. To view Freshman Edge approved courses: [summer.uci.edu/programs/freshman](http://summer.uci.edu/programs/freshman).

SESSION	COURSE DEPARTMENT & NUMBER	5 DIGIT COURSE CODE	UNITS	LETTER GRADE, P/NP, AUDIT	COURSE FEE* (\$273/unit)	MATERIALS FEES**
II	UNI STU 83 (M,W 4-6:20pm)		2.0		\$546	\$0
II						
II	alternate choice:					

**FRESHMAN EDGE FEES:** Sum of COURSE FEES\*: \_\_\_\_\_ + Sum of MATERIALS FEES\*\*: \_\_\_\_\_ + (non-refundable) MANDATORY CAMPUS FEE: \$175 = **TOTAL FEES DUE:** \_\_\_\_\_

**PAYMENT:**  CHECK/MONEY ORDER ENCLOSED, payable to UC REGENTS  VISA  MASTERCARD  AMERICAN EXPRESS

CARD NUMBER: \_\_\_\_\_ AMOUNT TO CHARGE (US\$): \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_

CARDHOLDER'S NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

STREET: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

**4. STUDENT SIGNATURE:** Sign, date, and mail or drop-off to UCI Summer Session **by JULY 21**.

I hereby enroll in 2017 UCI Freshman Edge. I have read and understand the UCI Summer Session policies (available at the Summer Session Office and online at [summer.uci.edu/services](http://summer.uci.edu/services)) regarding registration, fees and refunds. I understand that the mandatory campus and materials fees are non-refundable. I understand that photos and videos of me may be taken during the course of my program and give permission for those photos to be used by the Freshman Edge website and other marketing materials.

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

<b>DELIVER YOUR COMPLETED REGISTRATION &amp; PAYMENT:</b>	by <b>MAIL</b> UCI Summer Session/Freshman PO BOX 6050 IRVINE, CA 92616-6050	in <b>PERSON</b> (Mon-Fri 8am - 5pm) UCI Summer Session Summer Session, Bldg A Bldg #231 on the campus map	<b>QUESTIONS?</b> Contact our office at (949)824-7649 or email: <a href="mailto:summer-freshman@uci.edu">summer-freshman@uci.edu</a>
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The University of California, in accordance with applicable Federal and State laws and University policy, does not discriminate on the basis of race, color, national origin, religion, sex, disability, age, medical condition (cancer-related or genetic characteristics), ancestry, marital status, citizenship, sexual orientation, or status as a Vietnam-era veteran or special disabled veteran. The University also prohibits sexual harassment. This nondiscrimination policy covers admission, access, and treatment in University programs and activities.

\*COURSE FEES for Summer Session are pending in the state budget and approval by the Regents of the University of California. Fees may be re-assessed if your student status for the Fall is changed. Your student status is subject to verification by the UCI Registrar.

\*\*Some courses require an additional non-refundable MATERIALS FEE. See course descriptions on the UCI Summer Session website for more details.

Participant's name: \_\_\_\_\_  
Please Print

UNIVERSITY OF CALIFORNIA,

**Waiver of Liability, Assumption of Risk, and Indemnity Agreement**

**Waiver:** In consideration of being permitted to participate in any way in

hereinafter called "The Activity", I, for myself, my heirs, personal representatives or assigns, **do hereby release, waive, discharge, and covenant not to sue** The Regents of the University of California, its officers, employees, and agents from liability **from any and all claims including the negligence of The Regents of the University of California, its officers, employees and agents**, resulting in personal injury, accidents or illnesses (including death), and property loss arising from, but not limited to, participation in The Activity.

\_\_\_\_\_  
Signature of Parent/Guardian of Minor      Date      Signature of Participant      Date

**Assumption of Risks:** Participation in The Activity carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks vary from one activity to another, but the risks range from 1) minor injuries such as scratches, bruises, and sprains 2) major injuries such as eye injury or loss of sight, joint or back injuries, heart attacks, and concussions to 3) catastrophic injuries including paralysis and death.

**I have read the previous paragraphs and I know, understand, and appreciate these and other risks that are inherent in The Activity. I hereby assert that my participation is voluntary and that I knowingly assume all such risks.**

**Indemnification and Hold Harmless:** I also agree to INDEMNIFY AND HOLD The Regents of the University of California HARMLESS from any and all claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorney's fees brought as a result of my involvement in The Activity and to reimburse them for any such expenses incurred.

**Severability:** The undersigned further expressly agrees that the foregoing waiver and assumption of risks agreement is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

**Acknowledgment of Understanding:** I have read this waiver of liability, assumption of risk, and indemnity agreement, fully understand its terms, and **understand that I am giving up substantial rights, including my right to sue.** I acknowledge that I am signing the agreement freely and voluntarily, and **intend by my signature to be a complete and unconditional release of all liability** to the greatest extent allowed by law.

\_\_\_\_\_  
Signature of Parent/Guardian of Minor      Date      Signature of Participant      Date