



Request for Day Visit
(For High School Seniors Only)

This form must be completed and returned to the Office of Admissions **at least two weeks prior** to your intended day visit to campus. Once your request is received, every effort will be made to arrange a student host for you. You will be contacted to confirm your request or to make other arrangements. We look forward to your visit.

Name _____
First Middle Last

Address _____
Street

City State Zip
Email address _____

Home telephone _____ Cell Phone _____

Male _____ Female _____

Requested Visit Date: _____ Arrival Time: _____ Departure Time: _____
Visits are scheduled Monday through Friday between 8 a.m. and 6 p.m.

Academic Interests _____

Extracurricular Interests _____

I hereby request permission to visit the University of Mary Washington campus as a day guest. I release UMW from all responsibility and liability for any accident or injury occurring to me while I am on campus. Further, **I realize that I am subject to and will abide by all rules and regulations of the University, and that I am totally responsible for my actions while visiting the University. I am aware that violation of UMW regulations may result in my immediate removal from campus and review of my admission status.** (An electronic copy of the student handbook of regulations is available at <http://www.umw.edu/studentaffairs/resources/>)

Student's Signature _____ Date _____

Parent's Signature _____ Date _____
(Approving student's visit and accepting above conditions)

Fax, email or mail to: UMW Office of Admissions
1301 College Avenue
Fredericksburg, VA 22401-5300
Fax: (540) 654-1707 admit@umw.edu