



Promo Code _____

Name _____

Preferred Name _____ Male _____ Female _____

Home Mailing Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (_____) _____ Cell Phone: (_____) _____

Email Address: _____

Diet Restrictions/Allergies/Special Accommodations: _____

T-Shirt Size: Small _____ Medium _____ Large _____ X-Large _____ XX-Large _____

Cougar Excursion will be held **July 25th-27th**, at Camp St. Christopher on Seabrook Island in South Carolina. Registration for this event is on a first come, first serve basis. The full cost of the program is \$135. Payments can be made via check, money order or credit card. Please make payable to the College of Charleston. All returned checks will be assessed a \$25 processing fee.

Cancellations made prior to **July 17, 2008** will be given a \$60 refund. Cancellations made on or after the July 17th date will forfeit the full cost of the program.

If you have specific questions concerning Cougar Excursion, please call (843) 953-6356, e-mail us at cougarexcursion@gmail.com, or visit our website at www.cofc.edu/slc.

Before Mailing:

1. Be sure to enclose registration form with payment
2. Registration must be received by **July 18, 2008 deadline**
3. Please mail to: Higdon Student Leadership Center
College of Charleston
66 George Street
Charleston, South Carolina 29424

Credit/Debit Payment

VISA MASTERCARD

Card Number _____ Expiration Date _____ Security Code _____

Name of Card Holder _____
Print name as it appears on credit card

Signature of Card Holder _____

Student Name _____ CofC Student ID Number _____

Address and Phone Number of Card Holder _____

City _____ State _____ Zip _____ Phone (_____) _____