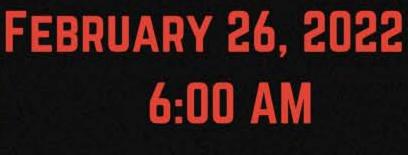
## CRANDLING State University Office of Admissions



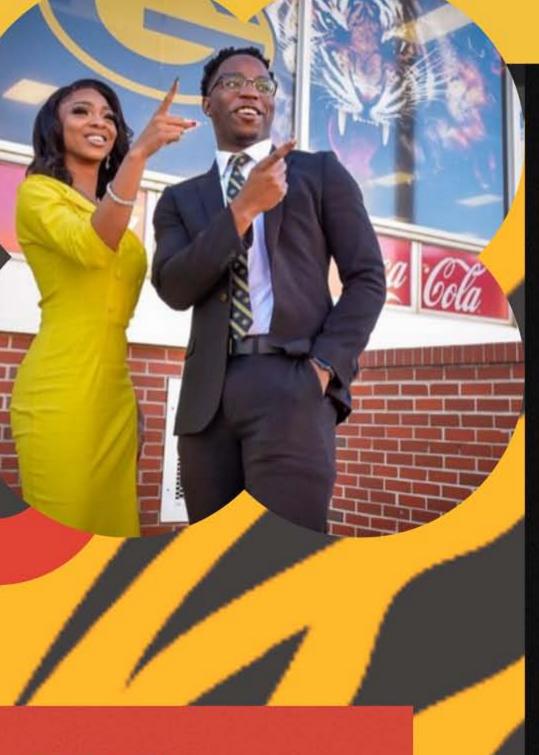


**WE WANT YOU!** 

- -High School Students
- -Transfer Students
- -Readmits/Returning

**Students** 

- -Graduate Students
- -ALL GRAMFAM



Register at: www.gram.edu/admissions

## Complete this registration form and return to:

Grambling State University
Office of Admissions & Recruitment
403 Main Street/ Box 4200
Grambling, LA 71245
admissions@gram.edu



For additional information or questions contact:

Office of Admissions & Recruitment

Contact Information: (318)274-6182/ (318)274-6571 or Email: admissions@gram.edu

Name of Individual or Organization:					
Name of Lead Chaperone:					
Address:					
City:	State:	Zip:			
Home Phone:	Cell Phone:				
Personal E-mail:					
Number of Students Registering:			Total:	Total Paid:	Total Due:
Number of T-Shirts: S M L XL	2XL 3XL	4XL			Due.
Number of Chaperones:					
(Chaperones must pay in order to receive t-sh	nirt, meal and game tid	cket)			
Number of T-Shirts: S M L XL	2XL 3XL_	4XL			
		L		<u> </u>	
	*FOR OFFICE USE O	NLY*			
DATE RECEIVED:					
METHOD OF PAYMENT – CASH, CHECK,					
MONEY ORDER					
TOTAL PAID:					
SIGNATURE:					
Total # of T-Shirts and Meal Tickets to be received:		Date pa	ckaged/by:		

**NO REFUNDS FOR PAYMENTS!**