



# Tusculum Michiganiense MMXIX

CAESAR NON SVPRA GRAMMATICOS

## APPLICATION 2019

JUNE 17 – JUNE 21

### APPLICATION CHECKLIST

- This application form**  
Completely filled out and signed.
- Health Form**
- Vaccination records**  
*Tusculum* requires proof of a tetanus shot within 10 years prior to the start date of the program or a waiver form. Waiver forms are available upon request.
- Consent and release form**  
Completely filled out and signed.
- \$300 Deposit**  
Make check payable to “Calvin College.” Your check will not be deposited until applicant is accepted. Applicants who are not admitted will have their deposit returned in full. For administrative reasons the deposit of admitted participants will not be returned.

### APPLICANT INFORMATION

Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_  
\_\_\_\_\_  
 Male  Female  
Nickname \_\_\_\_\_  
Birth date (mm/dd/yy): \_\_\_\_\_  
Address: \_\_\_\_\_  
Number and Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Cell phone: (\_\_\_\_) \_\_\_\_\_  
Email: \_\_\_\_\_  
Years of Latin instruction: \_\_\_\_\_  
T-Shirt Size:  Small  Medium  Large  XL  XXL

How did you learn about the *TUSCULUM MICHIGANIENSE*? \_\_\_\_\_

### EMERGENCY CONTACT INFORMATION

Parent #1 name: \_\_\_\_\_  
Last First Middle



Do you have any physical or mental condition or disability not disclosed on the Health Form? If so, please provide details. \_\_\_\_\_

**OTHER IMPORTANT INFORMATION**

Information about the summer program is available at [www.LatinPerDiem.com/Tusculum19](http://www.LatinPerDiem.com/Tusculum19). If you have any questions, please e-mail Tara Noe at [Tusculum.Email@gmail.com](mailto:Tusculum.Email@gmail.com) or in an urgent case call (616) 481-8681.

- 1) A \$300 non-refundable deposit must accompany this application. **\*The remaining balance of is due in full no later than May 20, 2019.** Mail a check or money order to the *TUSCULUM* business address (see below). We also accept PayPal. A service fee of 3% will be added to Paypal credit card transactions. Please send funds to [Tusculum.Email@gmail.com](mailto:Tusculum.Email@gmail.com).
- 2) Applications will be accepted on a first-come, first-served basis. All accepted participants will be notified as soon as their application is accepted.

\*In the event that camp is not held, deposit and fees will be returned in full.

**CERTIFICATION**

By my signature below, I certify the following: a) that the information on this form and in any documents related to my application is true and complete to the best of my knowledge; b) that I have withheld nothing about my physical or mental health either here or in having the Health Form completed. I understand that falsification or withholding of requested information on this application or any of its related components or documents will subject me prior to enrollment to disqualification from admission to the *TUSCULUM MICHIGANIENSE* program or after enrollment to expulsion.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

*A parent or legal guardian must also sign.*

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

**Please mail all completed application materials  
and deposit to:**

***TUSCULUM***  
**David C. Noe**  
**c/o Department of Philosophy and Classics**  
**3201 Burton SE**  
**Grand Rapids, Michigan 49546**