RHA invites you to host your siblings (ages 6-16) on October 20-21, 2017. Siblings will reside in the residence halls and attend activities all weekend long, planned just for them.

**Friday October 20**

4:00 p.m. – 7:00 p.m.  Registration, Towers MPR  
Register, enjoy dinner and design your own trick-or-treat bag

6:00 p.m. – 11:00 p.m.  Greek Life Carnival, Union Ballroom (DU Students: $5 at the door)

7:00 p.m.  
7:00 p.m.  
9:00 p.m. - 11:00 p.m.  DPC Cars 3, NiteSpot (Union 1st Floor)

**Saturday October 21**

11:00 a.m.  
Morning Brunch, Hogan Dining Hall

12:30 p.m. – 4:30 p.m.  
Carnegie Science Center; Depart from the Union
**We suggest you bring money for snacks and souvenirs**

12:30 p.m.  
Men's Football Game v. St. Francis, Rooney Field

1:00 p.m. – 3:00 p.m.  
Inflatable Games, Academic Walk

4:00 p.m.  
Volleyball v. LaSalle

4:00 p.m. - 6:30 p.m.  
Dinner, Hogan Dining Hall

8:00 p.m.  
RHA Fall Fun Night, Towers MPR

**Sunday October 22**

9:00 a.m.  
Celebrate Mass, Power Center Ballroom

10:00 a.m.  
Brunch hosted by President Gormley, Union Ballroom (4th Floor)

Registration Due by October 18, 2017 to Office of Residence Life, Assumption Hall
Please complete info below and return to the Office of Residence Life, Assumption Hall by October 18 along with $25 per sibling registration fee and the Minor Sibling Overnight Guest Registration Form.

Resident Student’s Name: ______________________________________

Cell Phone: _____________________________

Email: ________________________________

LLC Building/Room#: ____________________

Sibling Name: __________________________  Age: ___

Sibling Name: __________________________  Age: ___

Sibling Name: __________________________  Age: ___

Indicate which events you will attend. Do not include resident student below for meals as you will use your meal plan.

**Friday, October 20**
- Dinner, Hogan Dining Hall
- DPC Cars 3, NiteSpot (Union 1st Floor)
- DPC Milkshake Night, NiteSpot (Union 1st Floor)

**Saturday, October 21**
- Morning Brunch, Hogan Dining Hall
- Carnegie Science Center Trip
- Dinner, Hogan Dining Hall
- RHA Fall Fun Night, Towers MPR

**Sunday, October 22**
- Celebrate Mass, Power Center Ballroom
- Brunch hosted by President Gormley, Union Ballroom (4th Floor)
Duquesne University Office of Residence Life Minor Sibling Overnight Guest Registration Form (Siblings 5 - 16 years of age)

Host Student Information
Name: _______________________________________ LLC and Room #: ______________________
Cell Phone #: ____________________________ Gender: M / F
Date(s) of Stay: __________________________________________
Host’s Roommate(s) Signature(s): __________________________________________

Sibling Information
Name: ___________________________________ D.O.B.: _______________ Gender: M / F
Home Address: ____________________________________________ (CITY) (STATE) (ZIP)
Cell Phone: ____________________________ Home Phone: ____________________________
Parent or Guardian Name: ____________________________________________
Cell Phone: ____________________________ Home Phone: ____________________________
Medical Conditions, Medications, and Allergies: ____________________________
__________________________________________________________________________
__________________________________________________________________________

As a Duquesne University resident student, I accept full responsibility for my minor sibling(s) and understand that my sibling(s) are required to follow all Duquesne University and Residence Life policies during their visit. Failure to do so could result in parents being notified to pick up the sibling(s). In addition to following all Residence Life policies, I will escort my sibling(s) at all times during their stay in the Living Learning Centers. Siblings can show their copy of the guest registration form for admission to the residence halls when escorted by their host.

I realize that during the visit, I am responsible for the safety and wellbeing of my guest(s) and that Duquesne University and the Office of Residence Life cannot be held liable for any incidents such as lost property or personal injury that occur during the weekend.

__________________________________________
Parent/Guardian Signature
Date
__________________________________________
Host Student Signature
Date
__________________________________________
Resident Director Signature
Date