

## FORM ST 1

## **Student Emergency Information Form and Travel Contract**

Please print legibly

Personal Information			
First and Last Name:	StarID or Tech I	D:	
Phone:	Email:		
Medical Information	Emergency Info	Emergency Information	
Relevant Medical Conditions:	Contact Name:		
Current Medications:	Relationship:		
Allergies:	Phone Number:		
Student Travel Contract  I agree to the following terms to attend student activities on behalf of Hennepin Technical College.			
<ul><li>Abide by all local, state, and t</li><li>Represent HTC by remaining</li></ul>	erence/event.  e conference/event.  f Hennepin Technical College Studer  federal laws.  professional while at the conference  conference/event, I understand that	e and while staying in the hotel.	
Print Student's Name:			
Student Signature:		Date:	
Parent/Guardian Signature (if student is under age 18):		Date:	
FOR OFFICE USE ONLY			
GPA:	Holds:	Other:	
Director of Student Life and Career	Development Signature:	Date:	