



**Office of Undergraduate Admissions**  
 100 W. Rosedale Avenue, West Chester, PA  
 19383 Ph: 610-436-3411 Fx: 610-436-2907  
[www.wcupa.edu/admissions](http://www.wcupa.edu/admissions)  
[ugadmiss@wcupa.edu](mailto:ugadmiss@wcupa.edu)

## Visiting Student Permission Form

---

**WCU Bound**  
**9:30 am - 3:30 pm**

As a visitor on West Chester University’s campus you are subject to the same rules and regulations as any other student attending the university.

**Please note that if this form is not returned prior to or on the day of the program, you will not be able to participate.**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

WCU ID#: \_\_\_\_\_

Please have your parent/guardian sign below as consent to attend WCU’s day program.

**I, \_\_\_\_\_ give my consent for \_\_\_\_\_ to attend West Chester University’s WCU Bound. We have reviewed the Student Code of Conduct.**

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

Print Name: \_\_\_\_\_