Rock Eagle Housing Form

Fill out only ONE form for your entire school and upload by March 10, 2025

Coordinator Information:		
Coordinator Name:	School Name:	
School Address:		
Region:	County:	
School Phone #:	Home Phone #:	
Email Address:	Fax #:	
Transportation:		
Arriving by Bus:	Arriving by Car:	Arriving by Van:

Arriving in time for Dinner Tuesday (5:45-7:45) (Circle One) YES or NO

NAME	**STATUS** *(Coordinator, Chaperone, Bus Driver, Student)*	**GENDER** *Male or Female*

Do you want to cluster with another school: Yes or No

(If you do not make a special request, we will place you where there is space available)

School Name: _____ Region: _____

Coordinator Name: _____