

UPCEN COLLEGE TOUR



KENNESAW STATE UNIVERSITY April 12, 2025

The *Urban Pre-College Education Network, Inc. (UPCEN)* is hosting a trip to *Kennesaw State University* on *Saturday April 12, 2025*. The cost of the trip is \$55. If interested, please complete the following permission slip and waiver of liability and consent form. Submit all forms and payment to UPCEN, Inc. no later than Friday, March 28, 2025. For more information about the UPCEN program, please visit www.UPCEN.org or contact us at (404) 875-5626.

Kennesaw State University College Tour Permission Slip

| | |
|--|---|
| Date: | Saturday, April 12, 2025 |
| Time: | 8 AM – 4 PM |
| Location: | Kennesaw State University, 3391 Town Point Drive NW, Kennesaw, GA 30144 |
| Cost | \$55 – Covers Lunch & Transportation Costs |
| Transportation: | 25 Passenger Bus |
| Notes: | Attorney Melvyn R. Burrow (Bro. Kariuki) will rent a 25 passenger bus so space is limited. The first 20 students to submit their signed permission slips and \$55 payment will be able to attend. Students will meet at The Serenity Club, Inc., 1933 Moreland Ave SE, Atlanta, GA 30316 on Saturday, April 12, 2025 at 8 AM and will then travel to Kennesaw State University. Please respond by Friday, March 28, 2025 so that your child will have the opportunity to attend. Students will participate in Kennesaw State University Open House. For more information call 404-875-5626. |
| <p>Please return this permission slip and payment by Friday, March 28, 2025. You can submit all forms via fax at (404) 875-1344 or via E-mail at upcen10@gmail.com.</p> | |

I give permission for my child, (please include child’s full name), _____, to attend the UPCEN, Inc.’s college tour trip to Kennesaw State University on Saturday, April 12, 2025 from 8 AM to 4 PM. Enclosed is \$55 to cover the cost of the trip (please submit exact cash or check made payable to UPCEN, Inc.)

In case of an emergency, I give permission for my child to receive medical treatment. In case of such an emergency, please contact:

 Emergency Contact Name Emergency Contact Telephone #

 Parent/Guardian Full Name Parent/Guardian Contact Telephone #

 Parent/Guardian Signature Date

UPCEN | URBAN PRE-COLLEGE EDUCATION NETWORK

Kennesaw State University College Tour Waiver of Liability and Consent Form

| | |
|------------------|---|
| Date: | Saturday, April 12, 2025 |
| Time: | 8 AM – 4 PM |
| Location: | Kennesaw State University, 3391 Town Point Drive NW, Kennesaw, GA 30144 |

**Please return this waiver of liability and consent form and payment by
Friday, March 28, 2025.
You can submit all forms via fax at (404) 875-1344
or via E-mail at upcen10@gmail.com.**

I, _____ (parent), am the **parent and legal guardian** of _____ (a minor child). I am fully aware that the **Urban Pre-College Network, Inc. (UPCEN, Inc.)** is organizing a college tour trip to the Kennesaw State University in Kennesaw, Georgia on April 12, 2025. My child has my permission to attend this trip and participate in all related activities.

UPCEN, Inc. is hereby given the following authority on April 12, 2025 to consent to **any medical treatment** that may be **required** for my child in the place and with the same authority as me. **UPCEN, Inc.**, along with its employees, servants, and agents are hereby released from liability for **all actions** taken during this trip.

The signing of this waiver of liability form is being done voluntary, without duress, and with sound mind.

Name of Student/Child: _____

Name of Parent/Guardian: _____

Signature of Parent/Guardian: _____

Dated this _____ day of _____ 2025.