



Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
IHP Program: \_\_\_\_\_  Fall 20\_\_\_\_  Spring 20\_\_\_\_  Academic Year 20\_\_\_\_-20\_\_\_\_  
Home Institution: \_\_\_\_\_

**Emergency Contact Information:**

Please provide contact information for two people that IHP can contact in the event of an emergency. If you are listing your parents/guardians, please provide their contact information here even if you have already provided it in your application form.

**Program Bulletins:**

Before the program, and during the program as needed, IHP will send important information to students and their parents/guardians as listed in the student's application. These Bulletins include information such as group flight schedules, overseas mailing addresses, emergency contact numbers, faculty introductions, and pre-departure reading lists. IHP will send Bulletins by email unless asked specifically to do otherwise. Please indicate if you would like your emergency contacts to receive these Bulletins.

**Emergency Contact 1**

Name: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Work Phone: \_\_\_\_\_  
Home Phone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
Email: \_\_\_\_\_  
Bulletin Recipient? Yes\_\_\_\_ No\_\_\_\_

**Emergency Contact 2**

Name: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Work Phone: \_\_\_\_\_  
Home Phone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
Email: \_\_\_\_\_  
Bulletin Recipient? Yes\_\_\_\_ No\_\_\_\_