



PERFORMING ARTS & AI INTERNATIONAL SUMMER PROGRAM 2025 STUDENT REGISTRATION FORM

Please return to uc.summerprogram@utoronto.ca by March 1, 2025.

STUDENT INFORMATION

First Name: _____
Middle Name(s): _____
Family Name: _____
Nationality: _____
Passport Number: _____

Gender: _____
Date of Birth: _____ (dd/mm/yyyy)
City of Birth: _____
First Language: _____
Languages Spoken: _____

Address in Home Country

Street: _____
City: _____
Province/State: _____
Postal Code: _____
Country: _____

Telephone: _____
Mobile Telephone: _____
Email: _____

PARENT/LEGAL GUARDIAN INFORMATION

PARENT/LEGAL GUARDIAN 1 (Required)

First Name: _____
Family Name: _____
Relationship: _____
Home Address: _____
Email: _____
Telephone Number 1: _____
Telephone Number 2: _____

PARENT/LEGAL GUARDIAN 2 (Optional)

First Name: _____
Family Name: _____
Relationship: _____
Home Address: _____
Email: _____
Telephone Number 1: _____
Telephone Number 2: _____

EMERGENCY CONTACT INFORMATION

First Name: _____
Family Name: _____
Relationship: _____
Home Address: _____

Languages Spoken: _____
Email: _____
Telephone Number 1: _____
Telephone Number 2: _____

STUDENT MEDICAL INFORMATION

Does the Student have any pre-existing physical or mental health conditions that we should be aware of?

Yes No

If yes, please give details: _____

Does the Student require special assistance or support services?

Yes No

If yes, please give details: _____

Does the Student have any severe, life-threatening allergies?

Yes No

If yes, please give details & indicate severity of allergy: _____

Does the Student have any non-life-threatening allergies?

Yes No

If yes, please give details & indicate severity of allergy: _____

Describe what measures need to be taken if the Student comes into contact with any of these allergens (e.g. hospital visit required, medications to be administered, etc.): _____

Does the Student take or carry any medications?

Yes No

If yes, please provide detailed information about the medications (name, condition being treated, dosage, frequency of administration, etc.): _____

If the Student requires any behavioral/learning accommodations in the classroom, please provide information about what these accommodations are and how we can best facilitate them:

Does the Student have any special dietary needs (halal, kosher, vegetarian)?

Yes No

If yes, please give details: _____

HEALTH INSURANCE INFORMATION

General health insurance coverage is included as part of the Program fees. If Parents/Legal Guardians prefer to arrange insurance directly rather than use the insurance arranged by the University, the insurance information must be provided with evidence that it is in force prior to the Student's arrival to the Program. No Student can participate in the Program without satisfactory coverage. If an independent health insurance policy is being secured for the Student, Confirmation of Insurance must be provided.

IMMIGRATION STATUS IN CANADA

Does the Student currently have a Study Permit/Has the Student's Study Permit application been approved?:

Yes No Pending

Tick off the box that applies to your immigration status:

Study Permit/Student Visa Visitor Visa/Visitor Status Canadian Citizen

Other (please give details): _____

TRAVEL INFORMATION

Please indicate if the Student will require Airport Pick-Up and/or Drop-Off services.

*If you indicate 'No,' the Student is responsible for his/her own arrival to and/or departure from the Program

The Student will require Airport Pick-Up:

Yes No

The Student will require Airport Drop-Off:

Yes No

FLIGHT DETAILS (if known)**Arrival**

Airline & Flight #: _____

Arrival Location: _____ (Airport Code)

Arrival Date: _____ (dd/mm/yy)

Arrival Time: _____ (hr:min)

Departure

Airline & Flight #: _____

Departure Location: _____ (Airport Code)

Departure Date: _____ (dd/mm/yy)

Departure Time: _____ (hr:min)

Airport Transfer (Only complete this section if the Student's flight routes include layovers)

None One Way Two Ways

1. Point of Transfer: _____ (City) _____ (Airport Code)

2. Point of Transfer: _____ (City) _____ (Airport Code)

The University of Toronto recommends that Parents/Legal Guardians arrange travel insurance for Students.

EXTRA DAY ON CAMPUS

The Student can check into the program on July 13, 2025 (program starts on July 14) and check out on August 2, 2025 (program ends on August 1). The Student may stay one day longer before and/or after the Program period, if his/her travel arrangements require. Please indicate if, due to travel constraints, the Student will need to stay on campus for one or two Extra Days:

Yes No

If yes, please indicate the date(s) of the Extra Day(s): 1. _____ (dd/mm/yy) 2. _____ (dd/mm/yy)

(Extra Days beyond this may be approved on a case-by-case basis at an additional rate of \$125.00 CAD/day)

GOVERNMENT OF CANADA CUSTODIAL DECLARATION FORM

Details on Custodianship Requirements and can be found on the following Government of Canada website: <http://www.cic.gc.ca/english/visit/minors.asp>. If required, please tick off the box below to indicate that You (the Student's Parent/Legal Guardian) have completed the form, that it has been notarized, and that it is being submitted to us with this Student Registration Form.

Yes, the completed and notarized Government of Canada Custodial Declaration Form is attached to this completed Student Registration Form.

PARENT/LEGAL GUARDIAN CONSENT AND DECLARATION

I, the undersigned, have read and reviewed this Student Registration Form and confirm that all information enclosed is accurate to the best of my knowledge. I understand that this is a residential academic program and hereby give my son/daughter or legal dependent permission to attend this program. I have read, I understand, and I agree to be bound by the University of Toronto's UC Performing Arts & AI International Summer Program Terms & Conditions Agreement.

Printed Name of Parent/Legal Guardian

Signature of Parent/Legal Guardian

Date Signed

STUDENT CODE OF CONDUCT

The University of Toronto expects students to act with maturity and to make responsible decisions concerning their conduct. All students and staff are expected to actively contribute to creating a safe, stimulating, and supportive learning and living environment.

Each student has the right to be treated with respect and has an obligation to treat others with respect. Students will actively foster a welcoming, friendly, and inclusive environment both in and out of the classroom. The University of Toronto does not tolerate discrimination, harassment, or bullying on the basis of, but not limited to, race, ancestry, ethnic origin, citizenship, age, gender, sexual orientation, religious beliefs, marital status, or ability.

All students are expected to acknowledge and abide by the rules outlined in the enclosed Terms and Conditions Agreement.

I, _____, have read and understood the expectations outlined above and in the General Rules of Conduct.

Student's First Name

Student's Last Name

I also acknowledge that possession and/or consumption of alcohol or illegal substances is forbidden throughout the duration of the Program and that violation of this policy will result in my immediate expulsion from the Program. I further accept that if I am found to be in possession of illegal substances, that the police may be involved and criminal charges could be laid.

Printed Name of Student

Signature of Student

Date Signed

Printed Name of Parent/Legal Guardian

Signature of Parent/Legal Guardian

Date Signed

SUBMITTING FINAL FORMS

Please return all forms by March 1, 2025.

To complete your registration for the UC Performing Arts & AI Summer Program, you must submit the Student's final forms via email to uc.summerprogram@utoronto.ca, pay the first installment upon acceptance, and pay the remaining program fees by **June 15, 2025**.

Completed Final Forms Checklist:

- Registration Form
- If Required - Government of Canada Custodial Declaration Form

Next Steps:

- If applicable, secure Student's Canadian Visa or eTA. You should apply for your Canadian Visa or eTA *as soon as you receive your Letter of Acceptance*
- Pay the first installment upon acceptance.
- Pay the remaining Program fees balance no later than June 15, 2025
- If applicable, secure Student's independent Health Insurance and/or Travel Insurance Coverage
- Submit Student's finalized Flight Details if they are not completed in Registration Form above or if they have been changed

**If you have any questions, please contact the
UC Performing Arts & AI International Summer Program
Office by email at
uc.summerprogram@utoronto.ca**