Welcome to Cortland-opoly!

Siblings' Weekend is a long standing tradition at SUNY Cortland. We, the Student Activities Board, are excited to welcome younger siblings to SUNY Cortland during the weekend of February 26 – 28, 2016. We are very enthusiastic about the plans for this year’s weekend and hope you will join us! Siblings must be between the ages of 6 and 16 years old in order to participate, as the activities are designed for that age group. It is crucial that parents/guardians fully complete the registration form and return it along with the signed parental agreement and payment for the activity package. Registration forms are due no later than Friday, February 12, 2016.

We hope to see you there!

Sincerely,
Gillian Farnan, Class of 2018
SAB Siblings’ Weekend Chairperson

Please note: Only siblings who have registered and paid for a weekend activity package will be able to attend the events and stay in the residence halls. Please remember that your SUNY Cortland student is responsible for his or her sibling(s) and they must sign an agreement stating this at registration. Your Cortland student is also responsible for paying for any meals not included in the activity package.

If you have any questions regarding Siblings Weekend, please contact the Campus Activities Office at 607-753-2322.
# Schedule of Activities

## Friday, February 26

<table>
<thead>
<tr>
<th>4-6 p.m.</th>
<th>Arrival &amp; Check-in</th>
</tr>
</thead>
<tbody>
<tr>
<td>Where:</td>
<td>Corey Union Lobby</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4 p.m. - Close</th>
<th>Dinner</th>
</tr>
</thead>
<tbody>
<tr>
<td>Where:</td>
<td>Neubig/Bistro</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>7:30 – 10:30 p.m.</th>
<th>Movie: Monster's Inc.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Where:</td>
<td>Corey Union Function Room</td>
</tr>
<tr>
<td>Come to unwind and watch a movie. Bring blankets, pillows and chill out while watching Monster’s Inc. on the BIG screen. Popcorn and cotton candy will be provided—just like an actual movie theatre.</td>
<td></td>
</tr>
</tbody>
</table>

## Saturday, February 27

<table>
<thead>
<tr>
<th>12–3 pm</th>
<th>Carnival</th>
</tr>
</thead>
<tbody>
<tr>
<td>Where:</td>
<td>Corey Union, Function Room</td>
</tr>
<tr>
<td>Come and join us as we have giant games, arts and crafts and much, much more! Play life size Jenga, Scrabble, Operation and have fun just playing around.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>5 p.m.- Close</th>
<th>Dinner</th>
</tr>
</thead>
<tbody>
<tr>
<td>Where:</td>
<td>Neubig/Bistro</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>8 p.m.</th>
<th>Comedy Magician Hypnotist</th>
</tr>
</thead>
<tbody>
<tr>
<td>Where:</td>
<td>Corey Union, Function Room</td>
</tr>
<tr>
<td>Alan “The Sandman” Sands is a comedian magician and hypnotist who has entertained children and adults of all ages. See him woo the crowd with his awesome, wonderful and entertaining tricks for everyone.</td>
<td></td>
</tr>
</tbody>
</table>

## Sunday, February 28

<table>
<thead>
<tr>
<th>10 a.m. – 1 p.m.</th>
<th>Big Finale Brunch!</th>
</tr>
</thead>
<tbody>
<tr>
<td>Where:</td>
<td>Neubig/Bistro</td>
</tr>
</tbody>
</table>
Registration Form

Registration Includes:

- T-shirt for sibling(s)
- 3 meals for sibling(s)
- Admission for sibling(s) and Cortland student to:
  - Movie Night
  - Carnival
  - Comedy Magician Hypnotist

Cortland Student Information

Name
______________________________________________

Address
______________________________________________
______________________________________________

Phone (   ) __________________________

Parent/Guardian Information

Name
______________________________________________

Address
______________________________________________
______________________________________________

Phone (   ) __________________________

Sibling(s) Information

Name
______________________________________________

Age _______   T-shirt Size:  YS  YM  S  M  L  XL  XXL
(Please circle)

Name
______________________________________________

Age _______   T-shirt Size:  YS  YM  S  M  L  XL  XXL
(Please circle)
Payment Form

Payment

Choose an option:
- □ 1 Cortland student & 1 sibling - $30 total
- □ 1 Cortland student & 2 siblings - $55 total

Choose a method of payment:
- □ Check (Payable to ASC)
- □ Credit card: ________VISA              ________MasterCard

Account holder’s name: ____________________________________________
Account number: __________________________ Exp. date: ________
Signature: ________________________________ Sec. code: ________ (3 digit)

Submit:
- □ Mail: Office of Campus Activities, Corey Union, Room 406, SUNY Cortland, P. O. Box 2000, Cortland, NY 13045
- □ E-mail: sab@cortland.edu with subject line “SIBS REGISTRATION”
- □ Fax: 607-753-2808
- □ Call: 607-753-2322

Registration due no later than February 12, 2016.

Check List

Did you remember to complete and include:
- □ Registration Form
- □ Payment Form
- □ Parental Responsibility Agreement

For Office Use Only: Date Received ________ Date Processed ________
I understand that my son/daughter is taking part in a SUNY Cortland Student Activities Board program and he/she will be under the supervision of ______________________, a SUNY Cortland student, during Siblings’ Weekend. I also understand that each son/daughter must abide by all college rules and policies as outlined in the SUNY Cortland Code of Student Conduct.

If either my visiting son/daughter or college student, while participating in Siblings’ Weekend, violates the Code of Student Conduct, state, federal, or local laws it is understood that the following procedure will be followed:

→ My visiting son/daughter and my SUNY Cortland student will be addressed by SUNY Cortland staff regarding the violation, and my SUNY Cortland student may be referred to the Student Conduct office.

→ Parents/Guardians will be notified at the time of violation and are required to immediately pick up the visiting son/daughter registered for Siblings’ Weekend.

I accept the above responsibilities:

Parent Signature ___________________________ Date ______________

Emergency Contact:

Name ___________________________

Phone (          ) _____________________

Siblings’ Weekend
Parental Responsibility Agreement
February 26 - 28, 2016