STEAM Camp Parent Permissions Form

Participant Information:

First Name:	Middle:	Last:			
Gender:	Grade:	DOB:			
Email address the camper will use to access Google Classroom:					
Adult T-Shirt Size:	Previously attended STEAM Camp?:				

How did you hear about us?

Select all	that	app	ly:
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Blog or digital Publication: Print Newspaper:

House of Worship: Local School:

Returning Camper: Search Engine (Google, Yahoo, etc.):

Social Media: Other*:

Governors State University (monitors, Recommendation by friend, colleague,

cable station, etc: or family member:

*If other, tell us where:

Contact Information:

Address One:		Address Two:	
City:	State:		Zip Code:
Phone number:			

Parent/ Guardian One Information:

First Name:	Last Name:

Gender:		Relation	nship:
Address One:		Address	s Two:
City:	State:		Zip Code:
Cell Phone:		Add'tl P	hone:

Parent/ Guardian Two Information:

First Name:		Last Na	me:
Gender:		Relationship:	
Address One:		Address Two:	
City:	State:		Zip Code:
Cell Phone:		Add'tl P	hone:

Participation Requirements:

Governors State University's STEAM Camp is funded by camp contributors and grantors, including the Public Health Institute of Metropolitan Chicago/ Creating Pathways and Access for Student Success (CPASS) who may include specific qualifications/ stipulations.

Participant Requirements:

- Parent/ Guardians and prospective campers agree to provide mathematics and science grades for two terms prior and two terms after the session(s) of STEAM Camp as a condition of the CPASS grant which provides the majority of the 2023 STEAM Camp funding.
- Grade data is used ONLY to assess the effectiveness of camp activities as they
 relate to grant funds and have no bearing on camp placement. Data will be
 aggregated and anonymized.
- Important: Racial/ ethnic information is used to determine CPASS demographics and to determine eligibility for the CPASS Scholarship, but has no bearing in camp admission, scheduling, or related activities. Data will be aggregated and anonymized.

Please provide grades for the last two academic terms for mathematics (this may include general mathematics or specific math disciplines— algebra, geometry, trigonometry, etc.):	
Please provide grades for the last two academic terms for science (this may include general science or specific science disciplines— biology, chemistry, physics, etc.):	

I consent to provide math and science grades when requested, and I understand and agree that registration is not complete until a camper's completed registration form, liability, and photo release form, and a physical parental/ guardian signature have been successfully and accurately completed and received.

Failure to provide required information in a timely and accurate fashion may result in the inability to participate in future camp activities or scholarships.

Camper Name:
Camper Signature:
Parent/ Guardian Name:
Parent/ Guardian Signature:

Camper Race/ Ethnicity:

African American/ Black:	Asian:
Hispanic/Latino:	Native American or Alaska Native:
Native Hawaiian or Pacific Islander:	White (Non-Hispanic):

Release of Liability:

In consideration of being allowed to participate in program-related events and activities sponsored for or by Governors State University, I the undersigned, acknowledge, appreciate, and agree as follows:

- 1. I hereby RELEASE, WAIVE, DISCHARGE, and COVENANT NOT TO SUE, Governors State University, its officers, servants, agents, or employees from any and all liability, claims, demands, actions, and causes of action whatsoever arising out or related to any loss, damage, or injury, that may be sustained by me, or to any property belonging to me, WHETHER CAUSED BY THE NEGLIGENCE OF Governors State University, or otherwise, while participating in such activity, or while in, on, or upon the premises where the activity is being conducted or in transportation to and from said premises.
- 2. I VOLUNTARILY ASSUME FULL RESPONSIBILITY FOR ANY RISKS OF LOSS, PROPERTY DAMAGE OR PERSONAL INJURY, that may be sustained by me, or any loss or damage to property owned by me, as a result of being engaged in such an activity.
- It is my express intent that this Agreement shall bind the members of my family, my heirs, assigns and personal representative, and shall be deemed as a RELEASE, WAIVER, DISCHARGE, and COVENANT NOT TO SUE GOVERNORS STATE UNIVERSITY.
- 4. I UNDERSTAND THAT GOVERNORS STATE UNIVERSITY MAY SEEK EMERGENCY MEDICAL CARE ON MY BEHALF, AND THAT I AM RESPONSIBLE FOR ALL ASSOCIATED COSTS OF SAID CARE.
- 5. I UNDERSTAND THAT GOVERNORS STATE UNIVERSITY WILL NOT BE RESPONSIBLE FOR ANY MEDICAL OUTCOMES OR COSTS ASSOCIATED WITH AN INJURY THAT I MAY SUSTAIN. I RELEASE AND HOLD HARMLESS ITS AGENTS, AFFILIATES, OFFICERS AND EMPLOYEES FROM ALL MEDICAL COSTS AND MEDICAL EXPENSES ASSOCIATED WITH THIS ACTIVITY.
- 6. I understand that it is my responsibility as a parent or guardian to provide appropriate supervision during at home camp activities.

7. I understand that if my child does not follow camp rules and/ or instructions or is disruptive, that s/he may be asked to leave camp for the day, the week, or the entire camp season at the discretion of Governors State University. Please see the STEAM Camp Parent Handbook for details.

I have read this Agreement for Release of Liability, fully understand its terms, understand that I have given up substantial rights by signing it and sign it freely and voluntarily without any inducement.

Camper Name:
Camper Signature:
Parent/ Guardian Name:
Parent/ Guardian Signature:

Image Release:

I as a minor, and my parent or legal guardian, do hereby give permission to Governors State University, to use my photograph or photographic image in official university business, including: university websites, university newsletters and newspapers, etc. I understand that Governors State University's Legal Department requires that all minors who have agreed to pose for a photograph for use in the promotion of Governors State University and its departments/units must sign a photograph release form (along with his or her parent). It is agreed that the use of my photograph or photographic image shall in no way be used in any other forum other than for official university business.

In consideration of my engagement as a model, and for other good and valuable consideration herein acknowledged as received, I hereby grant to Governors State University and assigns, those acting with its authority and permission, the irrevocable and unrestricted right and permission to copyright, in its own name or otherwise, and use, re-use, publish, and re-publish photographic portraits or pictures of me or which I may be included, in whole or in part, or composite or

distorted in character or form, without restriction as to changes or alterations, in conjunction with my own or a fictitious name, or reproductions thereof in color or otherwise, made through any medium at his studios or elsewhere, and in any and all media now or hereafter known for illustration, promotion, art, editorial, advertising, trade, or any other purpose whatsoever. I also consent to the use of any printed matter in conjunction therewith.

I hereby waive any right that I may have to inspect or approve the finished product and the advertising copy or other matter that may be used in connection therewith or the use to which it may be applied.

I hereby release, discharge, and agree to save harmless Governors State University and assigns, and all persons acting under its permission or authority or those for whom acting from any liability by virtue of any blurring, distortion, alteration, optical illusion, or use in composite form, whether intentional or otherwise, that may occur or be produced in the taking of said picture or in any subsequent processing thereof, as well as any publication thereof, including without limitation any claims for libel or invasion of privacy.

I do hereby release, acquit and forever discharge the State of Illinois, Governors State University, its officers, employees, attorneys, representatives, insurers and assigns from any and all demands, cause of action and/or judgments of whatsoever nature of character, past or future, known or unknown, whether in contract or in tort, whether for personal injuries, property damage, payments, fees, expenses, accounts receivable, credit, refunds, or any other monies due or to become due, or damages of any kind or nature, and whether arising from common law or statute, arising out of, in any way, the use of my photograph or photographic image for official university business.

This image release contains the entire agreement between the parties and shall be binding upon and inure to the benefit of the successors and assigns of the undersigned.

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to all of the provisions of the IMAGE RELEASE.

Camper Name:	
Camper Signature:	
Parent/ Guardian Name:	
Parent/ Guardian Signature:	

Medical/ Allergy Information:

Medical conditions and special needs:

Campers may be exposed to potential allergens including, but not limited to chocolate, cocoa, coconuts, eggs, fish, milk, peanuts, shellfish, soy, tree nuts, gluten and wheat. Parents and campers should exercise appropriate caution particularly when making cafeteria selections and dining.

Do you have allergies or dietary restrictions? YES (OR) NO Allergies and dietary restrictions: