#### SUMMER PROGRAMS RULES

- · Classes/events will be attended on time.
- Possession or use of tobacco, alcohol, marijuana, chemicals, non-prescription drugs, or any other drug is prohibited.
- Housing is in residence halls; all housing rules are followed and respect for privacy and the possessions of others is expected.
- Skateboards and rollerblades are not permitted and should not be brought to campus.
- Valuable jewelry and sentimental items should be left at home. TLU is not responsible for lost or missing items.
- Boys and girls are housed separately and rooms of the opposite sex are off limits at all times.
- · Cars must remain in designated parking lots the entire TLU Summer Program session.
- It is inappropriate to have family or friends visit in the residence halls while camp is in session.
- Participants are not allowed to leave the campus unless on an official camp field trip.
- Damaging, altering, or removing property will result in removal from camp. Assessed charges will be the sole responsibility of the parent/guardian, including fees for setting off false alarms.
- TLU has permission, without further consideration, to take and use, or authorize the use of, pictures, movies, statements or other forms of publicity for future promotion.
- TLU reserves the right to protect our campers from others and him/herself and to maintain the integrity of the event. Therefore, if he/she is observed with, or found in possession of tobacco, alcohol, or drugs; exhibits inappropriate behavior; leaves the property; or is involved in any major disturbance—as determined by TLU Summer Programs personnel—the parent/guardian will be contacted and the camper will be sent home immediately at parental expense without refund.
- TLU Summer Programs' refund policy is stated on the application.
- Bills incurred by the camper for EMS, hospital visit, doctor's office visit, filling of prescription(s), etc. are the responsibility of the camper's parent/guardian.

In accordance with the rules of TLU's Summer Programs I, the undersigned parent and/or legal guardian, hereby give my consent for my child/ward to participate in all event activities except (list below):

Parent/Guardian Signature Below

Date

## PHOTO, PRESS, AUDIO & ELECTRONIC MEDIA RELEASE

I authorize Texas Lutheran University to use and publish the photographs and/or video recordings for which I have posed, and/or audio recordings made of my voice. I agree that Texas Lutheran University may use such photographs and/or other electronic media of me with or without my name and for any lawful purpose, including for such purposes as publicity, illustration, bulletin, and Web content.

I waive any right to inspect or approve the finished product or products and the advertising copy or other matter that may be used in connection with them or the use to which they may be applied. Additionally, I waive any right to royalties or other compensation arising or relating to the use of the photograph or electronic media.

I agree that the photographs, reproductions, and negatives are the sole property of Texas Lutheran University. I, and any persons acting on my behalf, release the photographer and Texas Lutheran University from any and all claims, actions and demands arising out of or in connection with the use of these photographs or electronic media.

In agreeing to this agreement and full release of liability by signing below, I acknowledge that I have read and understand these terms and conditions and agree to be bound by them.

I have read and understand this agreement.

Camper Signature \_\_\_\_\_\_\_Parent/Guardian Signature \_\_\_\_\_\_



#### TEXAS LUTHERAN UNIVERSITY

### **SUMMER PROGRAMS**

# AGREEMENT & HEALTH FORM

We look forward to having you on campus this summer!

| Participant Name (Last, First, MI) |  |  |
|------------------------------------|--|--|
| Event                              |  |  |
| Date                               |  |  |

**IMPORTANT**: This form must be completed by participant and parent/guardian and the information must be on file in the TLU Summer Programs Office in order to participate.

You may complete and sign the form electronically. (A link will be sent separately.) Or, you may complete the form, print, sign and return it to TLU at the address below

Texas Lutheran University Summer Programs 1000 W. Court St. Seguin, TX 78155

You may also complete, print and bring the form with you to check-in.

For questions or more information, please contact us at 830-372-8083 or visit www.tlu.edu.

## TEXAS LUTHERAN UNIVERSITY HEALTH & RELEASE FORM

| EMERGENCY INFORMATION                            | HEALTH HISTORY  | lowing:   |
|--|---|---|
| Camper Name                                      | _ ALLERGIES   | ☐ Ibuprofen (E.g.: Advil)   |
| Date of Birth                                    | – Medication  | Acetaminophen (E.g.: Tylenol)   |
| Event/Camp                                       |   | Cloroseptic lozenges  |
| Gender   |   | $\square$ Diphenhydramine (antihistamine) (E.g.: Be-  |
| Street Address City                              | − ☐ Seizures ☐ Hyperactivity (ADHD)   | nadryl)<br>Imodium AD   |
| State Zip  | ☐ Diabetes ☐ Ear Infections   | Caladryl lotion   |
| Day Phone  | Heart Disease Back Problems   | <ul><li>Decongestant (E.g.: Sudafed)</li><li>Antibiotic ointment</li></ul>  |
| Evening Phone                                    | Asthma Emotional Difficulties   | Antiblotic omtherit  Antiacid (E.g. Tums)   |
| Mobile Phone                                     | Other   |   |
| Parent/Guardian Name                             | Pacent Operations /Injuries /Illnesses  | If at any time it is necessary for my child/ward to receive outside medical attention for an in-  |
| Day Phone  |   | jury/illness sustained at Texas Lutheran Univer-<br>sity's Summer Programs event, I hereby give my  |
| Evening Phone                                    |   | consent to the Summer Programs staff to secure  |
| Mobile Phone                                     | _<br>Limitations to Activity  | necessary services. The Summer Programs staff<br>will attempt to contact me, but the first aid<br>provider, TLU nurse, EMS paramedics, or the   |
| EMERGENCY CONTACT  Name  Relationship  Day Phone | All participants under 18 years of age who stay in university housing must turn in all medica- tions (prescription and over-the-counter) at | Guadalupe Regional Medical Center and its doctors and nurses have my permission to treat, and/or prescribe medications to my child/ward while enrolled or participating in any activity under the auspices of TLU. also, I do herby for myself, my heirs, executors, and administrators release, absolve, and hold harmless the Univer- |
| Evening Phone                                    | check-in. Asthma inhalers and "epi-pens" may be   | sity, its employees, and angsts from any and all  |
| Mobile Phone                                     | <ul> <li>kept by the camper.</li> </ul>   | liability for any injuries, illnesses, or damage to person or property incurred while at the Sum-   |
| INSURANCE INFORMATION  Company Name              | List medications to be checked in. Participant's name must be on all medications.   | mer Programs event, which includes, but is not limited to cuts, bruises, sprains, strains, and broken bones.  Parent/Guardian Signature   |
| Policy Number                                    |   | <u>-</u>  |
| Name of Insured                                  |   | Date:   |