

## RULES OF SUMMER PROGRAMS

- 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. Texas Lutheran 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.
- Any damaging, altering, or removal of property will result in removal from camp, and assessed charges will be the sole responsibility of the parent/guardian, including fees for setting off false alarms.
- Texas Lutheran 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.
- Texas Lutheran 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:

\_\_\_\_\_  
Parent's/Guardian's Signature

\_\_\_\_\_  
Date

### PHOTO, PRESS, AUDIO, AND ELECTRONIC MEDIA RELEASE

I authorize Texas Lutheran University to use and publish the photographs and/or videotape 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 shall be Texas Lutheran University's sole property. 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 bound by them.

I have read and understand the above:

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

Parent Signature (if under 18)  
\_\_\_\_\_



TEXAS LUTHERAN UNIVERSITY

## SUMMER PROGRAMS

# AGREEMENT & HEALTH FORM

*We look forward to  
having you on campus  
this summer!*

Student Name (Last, First, MI)  
\_\_\_\_\_

Event \_\_\_\_\_

Date \_\_\_\_\_

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

Electronic signatures will **NOT** be accepted. After completing the entire form, please print, sign and return to TLU at the address below or bring with you to check-in.

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

For questions or more information, please contact us at 830-372-8083 or visit [www.tlu.edu](http://www.tlu.edu).

## EMERGENCY INFORMATION

Name \_\_\_\_\_

D.O.B. \_\_\_\_\_

Event/Camp \_\_\_\_\_

Sex:  M  F

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Day Phone \_\_\_\_\_

Evening Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

**Emergency contact (if parents cannot be reached)**

Name \_\_\_\_\_

Relationship \_\_\_\_\_

Day Phone \_\_\_\_\_

Evening Phone \_\_\_\_\_

## INSURANCE INFORMATION

Company Name \_\_\_\_\_

Policy # \_\_\_\_\_

Name of Insured \_\_\_\_\_

# TEXAS LUTHERAN UNIVERSITY HEALTH & RELEASE FORM

## HEALTH HISTORY

### ALLERGIES

Medication \_\_\_\_\_

Food \_\_\_\_\_

Other (insect, etc.) \_\_\_\_\_

- |   |  |
|---|--|
| <input type="checkbox"/> Seizures             | <input type="checkbox"/> Asthma                  |
| <input type="checkbox"/> Diabetes             | <input type="checkbox"/> Frequent Ear Infections |
| <input type="checkbox"/> Heart Disease        | <input type="checkbox"/> Back Problems           |
| <input type="checkbox"/> Hyperactivity (ADHD) | <input type="checkbox"/> Emotional Difficulties  |
| <input type="checkbox"/> Other _____          |  |

Recent operations / injuries / illness:

\_\_\_\_\_  
\_\_\_\_\_

Limitations to activity:

\_\_\_\_\_  
\_\_\_\_\_

### MEDICATIONS:

All participants under 18 years of age who stay in university housing must turn in all medications (prescription and over-the-counter) at check-in. Asthma inhalers and "epi-pens" may be kept by the camper.

- List medications to be checked in. Participant's name must be on all medication.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

First Aid provider can give my child the following:

- Ibuprofen (i.e. Advil)
- Acetaminophen (i.e. Tylenol)
- Chloroseptic lozenges
- Diphehydramine (Antihistamine) (i.e. Benadryl)
- Imodium AD  Caladryl lotion
- Decongestant (i.e. Sudafed)

If at any time it is necessary for my child/ward to receive outside medical attention for an injury/illness sustained at Texas Lutheran University's (TLU) Summer Programs event, I hereby give my consent to the Summer Programs staff to secure necessary services. The Summer Programs staff will attempt to contact me, but the first aid provider, TLU nurse, EMS paramedics, or the 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 hereby for myself, my heirs, executors, and administrators release, absolve, and hold harmless the University, its employees, and agents from any and all liability for any injuries, illnesses, or damage to person or property incurred while at the Summer Programs event, which include, but are not limited to cuts, bruises, sprains, strains, and broken bones.

Parent's/Guardian's Signature

\_\_\_\_\_

Date \_\_\_\_\_