Congratulations on your acceptance to the Adventures in STEM Summer Camp at CURENT and NIMBioS Research Centers!

Please fill out and print the liability and photography waivers, then send the completed forms and your check for \$50 to the address below. Be sure to make the check payable to the "University of Tennessee, Knoxville."

## Send signed documents and a check to our mailing address:

Judy Evans
1520 Middle Drive, Room 513
University of Tennessee
Knoxville, TN 37996-2250

Upon receipt of your documents and check, we will email you with further information about our camp, including itineraries, agendas, etc.

## Assumption of Risk and Release of Liability

I, $\qquad$ , in consideration of the opportunity to participate in the Adventures in STEM summer camp at the CURENT Engineering Research Center, NIMBioS, and the University of Tennessee, Knoxville, acknowledge the risk of accident or injury inherent in participation in the activities involved in the camp and all related activities. I agree that the University of Tennessee will not be responsible for any personal injury, including death, to me or damage to my property, unless negligently caused by employees of the University of Tennessee. I acknowledge that any claims for personal injury, death or property damage resulting from the negligence of the University of Tennessee employees shall be submitted to the Claims Commission for the State of Tennessee in accordance with the T.C.A. Section 9-8-307, et seq., as amended. I assume liability for and agree to indemnify and to hold the University and its employees harmless for all claims or damages caused, in whole or in part, by me and any negligent, intentional, or other act or omission on my part.

I agree to abide by all regulations, policies, and procedures of the University of Tennessee while in or on the premises where any Adventures in STEM camp activity is being conducted, following all instructions and procedures in order to maintain a maximum level of safety. Furthermore, I give the University of Tennessee permission to transport me by bus or van to an off-campus site or facility, if needed. I acknowledge that participation in the Adventures in STEM camp is wholly voluntary. I understand that there is no medical insurance policy carried by the University of Tennessee and that I should make sure that I am covered in the event of a serious accident. (NOTE: for the Adventures in STEM camp participants, CURENT has paid a camper's insurance fee, which provides limited coverage per Policy SRG 9052506-A. You may be responsible for amounts not covered by this policy, however, per policy memo.)

I also give permission for any emergency medical care or treatment by a physician, surgeon, hospital, or medical care facility that may be required, and accept responsibility for the costs not covered by Policy SRG 9052506-A.

I am above the age of 18 , or my parent or guardian is above the age of 18 , and have read the above statement and agree to the conditions set forth herein. This release and hold harmless agreement binds the members of my family and spouse, and my estate, heirs, administrators, personal representatives, assigns, and any other person entitled to act on my behalf. This agreement shall be construed under the laws of the state of Tennessee without regard to its conflict of law provisions and jurisdiction and venue will be in Knox County, Tennessee. If any portion of this is held to be invalid, illegal, or unenforceable, the remaining portion shall be in full force and effect.

I, or my parent or guardian, have read this document before signing it and sign this document of my own free act and deed, intending to be bound by the promises I have made herein.
Student Name (Please Print) Signature Date

Students under the age of 18 MUST have this form reviewed and signed by a parent or guardian. I have reviewed this document and sign on behalf of the student named above.

CLRENT
CENTER FOR ULTRA-WIDE-AREA RESILIENT ELECTRIC ENERGY TRANSMISSION NETWORKS

## Consent Release Form

I, (print name) $\qquad$ hereby give my consent for photographing, filming, audio/videotaping of my image and voice, and release to The University of Tennessee and the CURENT Engineering Research Center all rights of any kind to the materials in which I appear. This is a full release of all claims whatsoever I or my heirs, executors, administrators or assigns now or hereafter have against The University of Tennessee, or its employees, as regards to any use that may be made by them of said photographic reproductions, films, or audio/videotape.

Further, I acknowledge that my name and biographical material, portrait, picture, likeness, or voice may be used for purposes consistent with The University of Tennessee's mission of teaching, research and service, including the promotion and publicizing of the materials in which my image/voice appear. Such uses as may be made will not constitute a direct endorsement by me of any product or service.

I have read this entire document, understand the contents, and I have willingly agreed to the above conditions.

Date: $\qquad$
Name (print): $\qquad$
Address: $\qquad$
Signature: $\qquad$
Signature of Parent/Guardian (if under 18):

TO: Parents and/or Guardians of Academic Camp Participants
FROM: Ann Chappell Tallent, Administrative Specialist III Office of Risk Management

DATE: October 20, 2011
SUBJECT: Policy SRG 9052506-A - Effective July 1, 2011
As a participant in a University of Tennessee sponsored camp your child is covered under our Camper's Insurance Policy. The cost of this insurance is built into your camp fees. Chartis is the provider for the campers' insurance program.

The description of coverage is as follows:

1. Covers all registered "campers" participating in activities of the departmental-sponsored program, so long as the department supervises the activities.
2. Limits of Liability:

Accident Medical Expense Maximum $\$ 25,000$
Accidental Death Benefit \$5,000
Accidental Dismemberment Benefit $\$ 10,000$
Dental Benefit
Deductible
\$ 250 per tooth per accident
None
3. 24-Hour Coverage
4. Coverage is primary with benefits payable for covered medical expenses up to the policy maximum. You may be responsible for amounts not covered by this policy.

When it becomes necessary to file a claim please provide your child's social security number and birth date where indicated in Section A, complete section B in full, complete the authorization section of the form and sign and date the form in the space below the authorization section.

Mail the completed claim form along with any medical bills to:
The University of Tennessee, Office of Risk Management
112 Conference Center Building, Knoxville, TN 37996-4113
Please call me at 865-974-5409 if you have any questions.
/act
Attachment

## University of Tennessee Campus Parking Policy

For the Adventures in STEM Camp, parents/guardians will be able to drop their child off in Staff Lot 7, across the street from the Min Kao Building (directions can be found on our website, curent.utk.edu). We will have a staff member there to escort campers to the building. Please note that you will not be able to park your vehicle in Staff Lot 7. Additional parking information can be found below.

Students and visitors parking a vehicle in a campus lot are subject to abide by all UT Traffic \& Parking Regulations. All parking in campus lots is by PERMIT ONLY! You may find a copy of these rules and regulations at http://web.utk.edu/~pso/. UT Parking Services is located at 2121 Stephenson Drive (off Neyland Drive at Leinard Lane). Hours are M-F 7:30 a.m. to 4:45 p.m. You may reach them by phone at (865) 974-6031 or TD 974-6483. If you have any questions please contact Parking Services at 974-6031 or TDD 9746483

