



# Automotive Summer Camp Housing Contract

|                      |            |                                 |
|----------------------|------------|---------------------------------|
| Last Name            | First Name | Middle Name                     |
| Date of Birth        | Gender     | Student cell phone #            |
| Street Address       | City       | State, Zip Code                 |
| Parent/Guardian Name |            | Parent/Guardian Primary Phone # |
| Parent/Guardian Name |            | Parent/Guardian Primary Phone # |
| Favorite Music       | Hobbies    | Tobacco Smoker or Non Smoker    |
| Roommate Request     |            | Additional Requests             |

## Emergency Medical Information

| Yes | No | Please Check Yes or No -This information is voluntary   |
|-----|----|---|
|     |    | Allergies to foods, drugs, insect bites, dust. Please identify them and your reaction.          |
|     |    | Physical disabilities or conditions which might limit your participation. Please identify them. |
|     |    | If you are presently taking medication, please identify the medication.                         |

## Medical Authorization

Parent or legal guardian must sign for all persons under 18 years of age.

I understand that adult supervision will be provided. If an illness or injury develops, medical professionals will be contacted. If hospitalization is necessary, the participant will be transferred to Seward Memorial Hospital and I will be notified as soon as possible. I will not hold liable Southeast Community College or Southeast Community College employees for any injury or damage received by my child as a result of participation in the Southeast Community College Automotive Summer Camp. I understand and accept the above statement and further authorize each of the following:

- A. The health history is correct and the participant has my permission to engage in all program activities.
- B. I grant permission to the SCC adult personnel to contact medical professionals to employ such diagnostic procedures and medical treatment as deemed necessary.
- C. I understand that I am financially responsible for charges and hereby guarantee full payment to the medical professionals.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

(If 18 or under, parent or guardian must sign)

### Vehicle Information

**If the participant will be driving themselves to the Automotive Summer Camp, the following vehicle registration information must be provided. The participant will be required to check their keys in upon arrival. The keys will be returned upon departure.**

|                              |                         |               |
|------------------------------|-------------------------|---------------|
| Participant Driver License # | Vehicle License plate # | Vehicle Color |
| Vehicle Make                 | Vehicle Model           | Vehicle Year  |

### Parental/Guardian Authorization: (Initial Below)

**Initial:** \_\_\_\_\_ I do voluntarily consent to said minor’s participation in all activities of the Southeast Community College Automotive Summer Camp. In Milford, Nebraska. I assume responsibility for any medical treatment, transport fees or costs incurred directly or indirectly because of said minor’s participation. I also authorize the representative(s) of Southeast Community College to arrange for professional care and treatment in case of medical emergency. I hereby give permission to the physician selected by the representative(s) of Southeast Community College to hospitalize, secure professional treatment for and/or to order injections, anesthesia and/or surgery for the minor named above.

**Initial:** \_\_\_\_\_ I permit this minor to participate in the Southeast Community College Automotive Summer Camp and to engage in all activities related to the weekend program. I hereby assume the risk associated with participation and agree to hold Southeast Community College, its committees, employees, agents, representatives and volunteers harmless from any & all liabilities, actions, causes of action, claims, or demand of any kind and nature whatsoever which may arise by or in connection with said minor’s participation in any activities related to the Southeast Community College Automotive Summer Camp. The terms here shall serve as a Release and the assumption of the risk for said minor, his or her heirs, estate, executor, administrator, and assignees as well as members of my family.

**Initial:** \_\_\_\_\_ I also take full responsibility for any valuables that the above named participant takes to this camp and give permission for Southeast Community College to post pictures of said minor participating in this event in Southeast Community College publications including on its website.

**Initial:** \_\_\_\_\_ I further consent to permit authorized Southeast Community College employees to contact said minor after the Automotive Summer Camp with respect to other Southeast Community College programs and activities.

A photocopy of this form is as valid as the original.

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Parent/Guardian’s Signature Date

By signing this contract, the participant agrees to abide by all policies found on the “Code of Conduct” page.

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Student Applicant’s Signature Date



## Code of Conduct in Residence Halls

Southeast Community College wishes to provide a safe and secure setting for all those who participate in this Summer Camp. To do this, your cooperation of the following rules and conditions will be expected and greatly appreciated.

The following Code of Conduct rules and conditions will apply to all Southeast Community College Summer Camp participants and visitors during the Automotive Summer Camp on June 10th and 11th, 2016.

- Obey the laws. If found guilty of any law infraction, US Federal, NE State or local municipality, the student can expect no assistance from his/her Automotive Summer Camp Sponsors. The student will be returned to his/her parents/guardians as soon as he/she is released by authorities.
- Stealing is prohibited, without exception
- The student must be covered by a personal or parent/guardian health insurance policy
- Only participants who are legally of age to use tobacco will be permitted to use tobacco products while on the Southeast Community College campus. Tobacco users must use the designated smoking areas and are not permitted to use tobacco in Southeast Community College buildings. Smoking will only be permitted until curfew.
- Visitors by parents/guardians, siblings and/or friends while attending the Camp will not be allowed.
- Possessing or use of alcoholic beverages and/or illegal drugs is prohibited.
- Changing of room assignments is not permitted without prior approval by Housing Staff.
- Personal televisions, video game consoles, firearms, knives or weapons of any kind, are not permitted.
- All camp participants must be in their dormitory rooms for a room check by midnight. After the room check, Camp participants are not to leave their rooms unless it is an emergency situation until 6:00 AM the following morning.
- Quiet hours are from 12:00 AM— 9:00 AM on weekends.
- Participants of the opposite sex are not allowed in dormitory rooms at any time. It is a \$50.00 fine if participants do not comply.
- All Camp participants must respect personal and public property. Repair costs for damage incurred to property will be billed appropriately at the College's discretion.
- No cursing, rude, or violent behavior will be permitted.
- The fire exits at the end of each hallway in the dormitory are alarmed. Please do not open them.