



INDIANA UNIVERSITY
SOUTH BEND

27 May 2017

Dear STEPs Parent,

Thank you for choosing to enroll your child in IU South Bend's Summer Teen Enrichment Programs (STEPS). We've got some exciting activities planned for the camps. We're sure your teen will both have fun and learn a great deal over the course of the week.

Below, you can find the time, location and instructor(s) for the camp your child will be attending:

Camp	Dates	Location	Instructor(s)
Make a Scene	June 19-23 9am-12pm	Education & Arts 1017	Kevin McNulty & Elaine Roth
Creative Writing	June 26-30 1pm-4pm	Education & Arts 1017	Robert Russell
Mapping the Present	July 10-14 9am-12pm	Wiekamp Hall 2210	Sheena Ketchum
Battle of the Bots	July 17-21 1pm-4pm	Northside Hall 340	Liqiang Zhang

A map is included in the packet that marks the location of the buildings on IU South Bend's campus. Each building is adjacent to a parking lot where you can drop off your child. Please be advised that our instructors and staff are only responsible for supervising participants during the hours of the camp.

This packet also includes the STEPs Program Guidelines, a Program Release Form, and a Media Release Form. Please read the guidelines carefully. **The Program Release Form must be submitted for your child to participate in the camp(s).** You may mail the form to us, email it to nwort@iusb.edu as a pdf, or bring it to the instructor on the first day of the camp. The Media Release Form is to grant us permission to use photos and/or video of your child participating in camp activities. The college would use these images in promotional materials for future STEPs camps, such as the program website, posters and social media. No child will be named in these materials. Submitting this form is entirely optional. **If your child is participating in multiple camps, you only need to submit these forms once.**

Thank you again for choosing to send your child to STEPs. We look forward to meeting you both this summer. Please do not hesitate to contact me if you have any questions about the materials in this packet or about the program.

Sincerely,

Lee F. Kahan
Associate Dean and STEPs Director



LEGEND

- Visitor Parking
- Visitor Meter Parking
- Student Parking
- Faculty/Staff Parking
- Residential Parking
- Accessible Parking
- Accessible Entrance
- Food Service
- Emergency Phone

- 1) Administration Building & Information Gateway
- 2) Arts and Education Building
- 3) Bookstore (1st Floor)
- 4) University Grill
- 5) Courtside Cafe
- 6) Fine Arts Building
- 7) Greenlawn Hall
- 8) Main Auditorium
- 9) Northside Hall
- 10) Purdue Technology Building
- 11) Recital Hall 158
- 12) Riverside Hall
- 13) Franklin D. Schurz Library
- 14) Student Activities Center

- 15) University Center
- 16) Wiekamp Hall
- 17) Campus Security
- 18) Residential Community Center

- Campus Housing**
- A) Whitewater House
 - B) Oxbow House
 - C) Riverview House
 - D) Crew House
 - E) Bridge House
 - F) Watershed House
 - G) Creek House
 - H) Portage House

Assumption of Risk and Release from Liability (“Agreement”)

I, the undersigned, give permission for my Child to participate in the Summer Teen Enrichment Program, offered on behalf of The Board of Trustees of Indiana University (“IU”), at IU South Bend on 19-23 and 26-30 June and 10-14, 17-21 and 24-28 July, 2017 (the “Program”).

In consideration for my Child’s participation, I, on behalf of my Child, agree to the following:

1. I understand the Program consists of academic activities that will be held in the classrooms and laboratories at IU South Bend.
2. I understand that as part of my Child’s participation in the Program there are dangers, hazards, and inherent risks to which my Child may be exposed, including, but not limited to, the risk of serious physical injury, temporary or permanent disability, and death, as well as economic and property loss. I further understand that participating in the Program may involve other risks and dangers, whether known or unknown nor reasonably foreseeable, including exposure to non-hazardous laboratory chemicals and food/drink allergies.
3. I fully understand the scope of the activities and the risks involved. I voluntarily accept and assume all risks of injury, loss of life, or damage to property arising out of my Child’s participation in the Program.
4. I hereby release and fully discharge IU, including its officers, employees, and agents, from any and all claims or causes of action, including all liability for damage to personal property or personal injury which may result from my Child’s participation in the Program, that may be brought by me or my Child or for any injury or loss that my Child may suffer while participating in the Event, whether caused by negligence or otherwise, to the fullest extent permitted by law.
5. I further release, indemnify, and hold harmless IU, including its officers, employees, and agents, from and against any and all liability, actions, debts, claims, and demands of every kind whatsoever, including, but not limited to, any claim for negligence and/or any present or future claim, loss, or liability for which my Child may be liable to any other person or to IU that arises out of my Child’s participation in the Program.
6. In the event of an accident or serious illness, I hereby authorize representatives of IU to obtain medical treatment and transport for my Child on my behalf. I waive my right to receive informed consent prior to such transportation or treatment. I hereby hold harmless and agree to indemnify IU from any claims, causes of action, damages and/or liabilities, arising out of or resulting from the medical treatment or transport. I further agree to accept full responsibility for any and all expenses, including medical expenses that may derive from any injuries to my Child that may occur during his/her participation in the Program.
7. This Agreement shall be governed by and construed under the laws of Indiana. Notwithstanding any other agreement that I have signed related to this Program that purports to establish the venue for any litigation arising from this Program, I agree that I will file no action against The Trustees of Indiana University or its officers, employees, and agents, whether based on this Agreement or in any way otherwise connected to this Program, in any court other than the Circuit Court of Monroe County, Indiana.
8. **I understand and agree to all of the terms of this Agreement. I understand that I am giving up substantial rights (including my right to sue) and acknowledge that I am willingly signing this document. My signature on this document is intended to bind not only myself and my Child, but also the successors, heirs, representatives, administrators, and assigns of myself and my Child.**

Child’s name

Parent/guardian signature

Parent/guardian name

Date

INDIANA UNIVERSITY SOUTH BEND

Photographic, Video and Information Release Form

I hereby consent to the use of my photograph and/or biographical information for marketing, advertising, publicity and other promotional purposes by Indiana University South Bend and I waive all claims for compensation and damages for such use.

Date: _____

Name (printed): _____

Address: _____

City/State/Zip: _____

Telephone: _____

Email (optional): _____

Signature: _____

Signature of parent or guardian (if signing for a minor):

IU South Bend Summer Teen Enrichment Programs Rules and Procedures

Transportation

Transportation to and from the Summer Teen Enrichment Programs is the responsibility of the parent or guardian. Parents should pick up their children promptly at the conclusion of the camp for which they are registered, either at the classroom or a location they have arranged with their children. Instructors will not supervise children after the class has concluded.

Appropriate Access and Supervision of Children

Camp participants will be supervised during program hours by a faculty or staff member who has passed a background check to work with children. **Before and after program hours, it is the responsibility of parents/guardians to supervise their children while on campus.**

Reporting Suspected Child Abuse and Neglect

Indiana state law requires that **any person** who has reason to believe that a child is a victim of child abuse or neglect has an affirmative duty to make an oral report to Child Protective Services (CPS) **1-800-800-5556** or to their local law enforcement or to the IU Police department. Failure to report may result in criminal charges. In addition to notifying CPS and/or local law enforcement, state law and the university also require that faculty, staff, students, volunteers, and other university personnel report any suspected abuse or neglect of minors on Indiana University property or as part of an Indiana University program, to the IU Superintendent of Public Safety (Jerry Minger – jminger@iu.edu).

Appropriate Physical Contact and Communication with Children

Program staff and volunteers may not make any physical contact with children except when necessary to prevent harm in emergency situations.

Program staff and volunteers need to understand that they are held to a higher standard when they are working for a program. Participants see them as role models, and they are acting as the face of Indiana University. Staff and volunteers will:

- Be positive and patient with all participants.
- Never use or be under the influence of alcohol or drugs during camp activities.
- Never use tobacco products in view of program participants during program hours.
- Never use foul or inappropriate language during a program.
- Be mindful to immediately stop a participant's usage of foul or inappropriate language or conduct.

If a staff member is not adhering to these behaviors, the parent/guardian should contact the Program Director.

Appropriate Student Conduct

Program participants are expected to act respectfully toward their peers and program staff. If a student is behaving inappropriately, the instructor will contact the Program Director, who will then discuss the student's conduct with the parent/guardian. If the conduct persists, the student will be removed from the camp.

First Aid and Medical Treatment

- If a participant is believed to need medical treatment, the program director will contact the parent/guardian. In the event of an emergency, program staff and volunteers should call 911 for medical or emergency assistance.
- First aid and medical treatment will only be given by program staff/volunteers who have received proper training. In certain emergency situations it may be necessary for non-trained staff to intervene before emergency personnel arrive.
- Medication will not be given to participants without written parental permission. Medication must be in original packaging and should be stored and handled by only program staff/volunteers who have been designated to do so.

Contacts

Primary Program Contact: Lee Kahan, Associate Dean of the College of Liberal Arts and Sciences: lkahan@iusb.edu, 574-520-4305 (work), 574-485-6665 (cell)

Secondary Program Contact: Nick Wort, Administrative Assistant to the Dean's Office: nwort@iusb.edu, 574-520-4267

Facility Contact: Michael Prater, maprater@iusb.edu, 574-520-4319

Campus Police: iupdsb@iusb.edu, 520-4499 ext. 2

Jerry Minger, Superintendent of Public Safety: jminger@iu.edu, 812-855-4296