

Destination Forsyth Tech! 2016 Registration Form

Student Information: Please PRINT – Information must be legible.

Social Security Number _____ or Student ID Number _____

Name _____

Address _____

City _____ State _____ Zip Code _____ County _____

Telephone _____ Date of Birth _____ Age _____

Gender ___ Female___ Male Race ___White ___African American___ American Indian___ Hispanic___ Asian___ Other

School Presently Attending _____ Highest Grade Completed _____

How did you hear about Destination Forsyth Tech Summer Enrichment Program?

___ Forsyth Tech Website ___ WS/FC Schools' Magnet Fair ___ WS Journal's Camp Directory

___ 2016 WS Summer Camp Website ___ FT Postcard ___ Friend ___ Other _____

Parent Information: Please PRINT- Information must be legible.

Name _____ Email Address _____

Cell Phone _____ Work Phone _____

Name _____ Email Address _____

Cell Phone _____ Work Phone _____

Emergency Contact: In case of emergency notify:

Name _____ Phone Number _____ Relationship to Student _____

Name _____ Phone Number _____ Relationship to Student _____

The following person(s) have my permission to pick up my child:

Name _____ Relationship to Child _____

Name _____ Relationship to Child _____

Please provide information of any medical or behavioral conditions, allergies, medications, or special needs of your child of which the staff and faculty should be aware _____

Please initial after each statement:

Parent Permission: (1) I give permission for my child to enroll in Destination Forsyth Tech Summer Enrichment Program ___ (2) I will be responsible for picking up my child promptly at the end of class ___ (3) I have read the Discipline Policy and Code of Conduct and agree to both ___ (4) I give permission for Forsyth Tech to use photographs and/or videotapes of my child for marketing or promotional purposes of Destination Forsyth Tech Summer Enrichment Program ___ (5)

In the event that my child should require emergency medical treatment and reasonable attempts to contact me have been unsuccessful, I give my consent for emergency medical treatment deemed necessary by the licensed physicians or dentists at a nearby medical facility of preference.

Name of Insurer _____

Policy Number _____

Family Physician _____

Phone Number _____

Family Dentist _____

Phone Number _____

Parent's Signature _____

Date _____

Discipline Policy

All students must abide by the rules and regulations of Forsyth Tech. The instructor reserves the right to dismiss a student from class if the student demonstrates a behavioral problem or has issues with attendance. If a student is dismissed from class by the instructor, there will be no refund or transfer of tuition. Destination Forsyth Tech Code of Conduct Agreement for 2016 must be read and signed before registration.

Destination Forsyth Tech Code of Conduct Agreement

We are committed to providing an outstanding Summer Enrichment Program for all participants. To accomplish this goal, participants are expected to behave appropriately and promote a safe, fun and healthy environment through productive participation. We aim to promote character values of caring, honesty, respect, and responsibility in all aspects of our summer enrichment program. We ask that all participants and parents or guardians review this code together, sign the bottom and return all documents to the address below:

Forsyth Tech
2100 Silas Creek Pkwy
Winston-Salem, NC 27103
ATTN: Sarah Griffenhagen
Or scan and email documents to destination@forsythtech.edu.

As a participant in Destination Forsyth Tech Summer Enrichment Program, I will:

- Be respectful, cooperative and contribute positively to the experience of fellow participants.
- Be careful and considerate that my actions will not hurt another participant's feelings or hurt them physically, either intentionally or accidentally. I understand that pushing, kicking, hitting or fighting are not acceptable behavior, will not be tolerated, and will be grounds for suspension/dismissal from the summer enrichment program.
- Show respect to the instructors and staff and cooperate fully with their instructions, following directions at all times.
- Respect the rights and beliefs of others, and treat others with courtesy and consideration.
- Respect the property of others, including all college property and equipment and supplies.
- I will not mark, deface or destroy college or other's personal property.
- Conduct myself responsibly. I understand that horseplay, inappropriate touching, unwelcome teasing, bullying, or other unkind behaviors are not allowed and will not be tolerated.
- Communicate in an appropriate manner, which means I will not use foul language or gestures, harsh words or raise my voice.
- Adhere to all safety rules and regulations given for each activity he/she participates in while attending Destination Forsyth Tech Summer Enrichment program and use care in all activities.
- Wear appropriate attire to camp each day. Closed toe/closed heel shoes are suggested. Clothing that covers and does not cause a safety hazard, nor distract from camp activities.
- HAVE FUN- but not at the expense of others.
- Participate in all activities to the best of my ability.
- Not bring weapons, look-alike weapons or objects that may be used to threaten, intimidate or harm others or to damage property.

I understand and agree to the above Code of Conduct Agreement. I agree to follow the Code of Conduct Agreement to the best of my ability. If I have trouble with any points, I will be referred to the Program Coordinator. I understand that violation of the Code of Conduct Agreement can be grounds for automatic suspension and dismissal. If a participant is suspended from a class, no refunds will be given.

Youth Participant Name (please print) _____ Date _____

By printing your name above and initialing on this line you agree with this Code of Conduct. _____

Parent/Guardian Name (please print) _____ Date _____

By printing your name above and initialing on this line, you agree with this Code of Conduct. _____

I would like to register my child _____ in the following classes.

Please print

Week 1 June 27-30

Course #	Course Title	Ages	Time	Day	Fee	Location/ Room #
108755	Morning Fun & Movement	8-13	7:40am-9am	MTWTH	\$25	WC Gym
104120	Make Your First 3-D Video	11-13	9am-12pm	MTWTH	\$129	WC122
104101	Minecraft Modders	8-10	9am-12pm	MTWTH	\$129	WC18
104191	Under The Sea Art	8-10	9am-12pm	MTWTH	\$79	WC15
104118	Make Your First 3-D Video	8-10	1pm-4pm	MTWTH	\$129	WC122
104102	Minecraft Modders	11-13	1pm-4pm	MTWTH	\$129	WC18
108759	Afternoon Fun & Movement	8-13	4pm-5:30pm	MTWTH	\$30	WC Gym

Week 2 July 11-14

Course #	Course Title	Ages	Time	Day	Fee	Location /Room #
108756	Morning Fun & Movement	8-13	7:40am-9am	MTWTH	\$25	WC Gym
104105	App Attack	11-13	9am-12pm	MTWTH	\$129	WC18
104188	Paint Like the Masters	8-10	9am-12pm	MTWTH	\$79	WC15
104103	App Attack	8-10	1pm-4pm	MTWTH	\$129	WC18
104194	Photoshop	11-13	1pm-4pm	MTWTH	\$79	WC122
104192	Babysitting FUNdamentals	12-15	9am-12:30pm	MT	\$89	WC 12
104341	Pediatric First Aid/CPR	12-15	9am-12:30pm	W TH	\$50	WC 16, July 13 th WC 14, July 14 th
108760	Afternoon Fun & Movement	8-13	4pm-5:30pm	MTWTH	\$30	WC Gym

Week 3 July 18-21

Course #	Course Title	Ages	Time	Day	Fee	Location/Room#
108757	Morning Fun & Movement	8-13	7:40am-9am	MTWTH	\$25	WC Gym
104109	Minecraft Designers	11-13	9am-12pm	MTWTH	\$129	WC122
108844	Minecraft Modders	8-10	9am-12pm	MTWTH	\$129	WC18
104195	Animal Kingdom	8-10	9am-12pm	MTWTH	\$79	WC15
104107	Minecraft Designers	8-10	1pm-4pm	MTWTH	\$129	WC122
108845	Minecraft Modders	11-13	1pm-4pm	MTWTH	\$129	WC18
108763	Afternoon Fun & Movement	8-13	4pm-5:30pm	MTWTH	\$30	WC Gym

Week 4 July 25-28

Course #	Course Title	Ages	Time	Day	Fee	Location/Room#
108758	Morning Fun & Movement	8-13	7:40am-9am	MTWTH	\$25	WC Gym
104121	Lego Games	8-10	9am-12pm	MTWTH	\$129	WC18
104116	Minecraft Animators	11-13	9am-12pm	MTWTH	\$129	WC122
104113	Minecraft Animators	8-10	1pm-4pm	MTWTH	\$129	WC122
104193	Glow in the Dark Art	8-10	1pm-4pm	MTWTH	\$79	WC15
104122	Lego Games	11-13	1pm-4pm	MTWTH	\$129	WC18
108767	Afternoon Fun & Movement	8-13	4pm-5:30pm	MTWTH	\$30	WC Gym

RELEASE OF LIABILITY, WAIVER OF CLAIMS AND ASSUMPTION OF RISK AGREEMENT

I, the undersigned Participant, acknowledge that participation in the following activity: Destination Forsyth Tech Summer Enrichment (herein referred to as "Activity") is expressly conditioned on my agreement to each of the terms of this document. In consideration of being allowed to participate in the Activity, I hereby agree as follows:

1. **EXCULPATORY CLAUSE.** I affirm and acknowledge that I have been fully informed of the inherent hazards and risks associated with the Activity. I fully understand that these risks can lead to personal injury, illness, permanent disability, death or damage to my property. Despite the potential hazards and dangers associated with the Activity, I voluntarily agree to participate in the Activity and hereby ACCEPT AND ASSUME ALL SUCH RISKS, known and unknown, and assume all responsibility for the losses, costs, and /or damages following such personal injury, illness, permanent disability, death or damage to my property, even if caused, in whole or in part, by the negligence of Forsyth Technical Community College (herein referred to as "Forsyth Tech") or any of its officers, directors, agents, employees, volunteers or representatives with the exception of willful or gross negligence.
2. **RELEASE AND WAIVER.** I waive and release any and all claims based upon negligence, active or passive, with the exception of intentional, wanton, or willful misconduct that I may have in the future against Forsyth Tech and its officers, directors, agents, employees, volunteers and representatives which are in any way associated with the Activity.
3. I release Forsyth Tech and its officers, directors, agents, employees, volunteers and representatives FROM LIABILITY AND RESPONSIBILITY, whatsoever, for any claim of action that I, my estate, heirs, executors or assigns may have for any personal injury, property damage, or wrongful death arising from the Activity whether caused by active or passive negligence of Forsyth Tech or any of its officers, directors, agents, employees, volunteers or representatives with the exception of gross negligence. By executing this document, I agree to HOLD Forsyth Tech and its officers, directors, agents, employees, volunteers and representatives HARMLESS for any personal injury, illness, permanent disability, or death which may occur to me, or for any damage to my property, during the Activity.
4. **INDEMNITY CLAUSE.** I agree to Indemnify and Hold harmless Forsyth Tech and its officers, directors, agents, employees, volunteers and representatives for any and all claims arising out of or resulting from, or alleged to have arisen out of or resulted from, my engaging in or participating in the Activity.
5. By entering into this agreement, I am not relying on any oral or written representation or statement made by Forsyth Tech or any of its officers, directors, agents, employees, volunteers or representatives other than what is set forth in this agreement.
6. I understand that this waiver is intended to be as broad and inclusive as permitted by the laws of North Carolina and agree that if any provision of this agreement is found to be unenforceable or invalid, that provision shall be severed from this agreement. The remainder of this agreement will then be construed as though the unenforceable provision had never been contained in this document.

7. NO INSURANCE. I understand that Forsyth Tech does not carry or maintain health, medical, or disability insurance coverage for any participant. Each participant is encouraged and expected to obtain their own medical or health insurance coverage.
8. This agreement shall remain valid and in full force and effect from and after the date set forth herein below until expressly revoked by me in a written notice personally delivered to the College.
9. BINDS HEIRS. This agreement shall be binding upon my heirs, personal representatives, successors and assigns.
10. VOLUNTARY SIGNATURE. I HAVE FULLY READ AND FULLY UNDERSTAND THE FOREGOING AGREEMENT. I HAVE CONSULTED AND RELIED UPON MY OWN ADVISERS ON ALL QUESTIONS IN CONNECTION THEREWITH, AND I HAVE NOT RELIED UPON FORSYTH TECH OR ANY OF ITS OFFICERS, DIRECTORS, AGENTS, EMPLOYEES, VOLUNTEERS OR REPRESENTATIVES FOR ANY ADVICE OR EXPLANATION IN CONNECTION THEREWITH.

Print Name of Participant: _____

Address of Participant: _____

Signature of Participant: _____ Date: _____

Signature of Parent/Legal Guardian:

_____ Date: _____