

Carlow University Student Visitor Policy

The *Prepare to Care* and *Summer Science Nation* and workshops will include field trips to various locations around the city. These trips are integral to the planned purpose of the programs.

The students will travel by vans or buses or Carlow University vans, accompanied by the program directors and student leaders. Under no circumstances are participants permitted to leave the Carlow University campus or other field site, without supervision by the *Prepare to Care*, or *Summer Science Nation* team leaders.

During my participation in the *Carlow Summer Workshop Programs*, I agree to honor the Carlow University policies, including activities off-campus. If any behavior occurs that violates Carlow's visitor policies, my parent or guardian may be notified and I may be asked to leave the program.

Signature of Student: _____

Program attending: Prepare to Care _____ Summer Science Nation _____

Date: _____

Medical Authorization

In the event of any injury or illness to my student during her participation in this program, I give permission for the necessary medical treatment to be given.

I agree that in case of injury to my student, I will apply my hospitalization and/or accident insurance toward payment of the expenses incurred, and will not look to Carlow University for the payment of any medical or injury-related costs

Signature of Parent/Guardian: _____

Parent /Guardian phone number: _____

Insurance Company: _____ Policy Number: _____

Name and phone number of contact person in the event parent/guardian is not available: _____

This form must be completed and submitted at registration in order to participate in the Carlow Summer Workshop Programs.
