

Destination Forsyth Tech! 2017 Summer Enrichment Application Form

Process

1. Complete application. Be sure to:
 - Select classes you would like your child to attend.
 - Ensure all signatures and initials are provided where requested.
2. Submit completed documents by one of the following methods:
 - Scan and email documents to destination@forsythtech.edu or
 - U.S. mail to: Forsyth Tech, Attn: Tonya Monteiro, 2100 Silas Creek Pkwy, Winston-Salem, NC 27103
 - In-person at Forsyth Tech's West Campus, 1300 Bolton Street, Winston Salem, NC
3. Receive confirmation from Forsyth Tech and instructions on how to register your child for classes and pay by phone with credit card or in person at Forsyth Tech's West Campus, 1300 Bolton Street, Winston Salem, NC
4. If you have any questions, call Tonya Monteiro, Summer Enrichment Program Coordinator at (336)734-7703.

Note: We cannot accept checks or cash in the mail. Your child's place in the class is not secure until payment is received.

Student Information: Please **PRINT** – Information must be legible.

New Student Returning Student

First Name _____ Middle Name _____ Last 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 Journal's Camp Directory 2017 WS Summer Camp Website Social Media Forsyth Tech Mailer
 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 _____

Internal use: Student # _____ Date _____ Initials _____

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

Please print

WEEK 1 JUNE 26-29

Course #	Course Title	AGES	TIME	DAY	FEE	LOCATION
113206	Morning Care	8-13	8-9AM	MTWTH	\$25	GYM
112840	Minecraft Designers	8-10	9-12NOON	MTWTH	\$129	122
112863	Code Breakers	8-10	9-12NOON	MTWTH	\$129	1
112839	Animal Kingdom	8-11	9-12NOON	MTWTH	\$79	15
112864	Minecraft Modders	11-13	9-12NOON	MTWTH	\$129	18
112866	Minecraft Modders	8-10	1-4PM	MTWTH	\$129	18
113030	Adventures in Drama	8-11	1-4PM	MTWTH	\$79	35
112865	Code Breakers	11-13	1-4PM	MTWTH	\$129	2
112867	Minecraft Designers	11-13	1-4PM	MTWTH	\$129	122
113207	Afternoon Care	8-13	4-5:30PM	MTWTH	\$30	GYM

WEEK 2 JULY 10-13

Course #	Course Title	AGES	TIME	DAY	FEE	LOCATION
113208	Morning Care	8-13	8-9AM	MTWTH	\$25	GYM
112874	Make Your First 3D Video Game	8-10	9-12NOON	MTWTH	\$129	122
112877	Minecraft Animators	8-10	9-12NOON	MTWTH	\$129	1
112869	Paint Like the Masters	8-11	9-12NOON	MTWTH	\$79	15
112876	Star Wars Animation	11-13	9-12NOON	MTWTH	\$129	18
112870	Babysitting FUNdamentals	12-15	9-4PM	M	\$89	14
112938	Pediatric First Aid/CPR	12-15	9-12NOON	TW	\$60	14
112936	College Essay Writing	Rising 11 th & 12 th	9-12NOON	MTW	\$49	27
112875	Star Wars Animation	8-10	1-4PM	MTWTH	\$129	18
112934	Impromptu Adventures	8-11	1-4PM	MTWTH	\$79	35
112868	Public Safety Heroes	11-13	1-4PM	MTWTH	\$69	12
112930	Minecraft Animators	11-13	1-4PM	MTWTH	\$129	1
112933	Make Your First 3D Video Game	11-13	1-4PM	MTWTH	\$129	122
113209	Afternoon Care	8-13	4-5:30PM	MTWTH	\$30	GYM

Parent Signature: _____ Date: _____

Internal use:

Student # _____

Date _____

Initials _____

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

Please print

WEEK 3 JULY 17-20

Course #	Course Title	AGES	TIME	DAY	FEE	LOCATION
113210	Morning Care	8-13	8-9AM	MTWTH	\$25	GYM
113020	Lego Games	8-10	9-12NOON	MTWTH	\$129	18
113047	Glow in the Dark	8-11	9-12NOON	MTWTH	\$79	15
113023	Minecraft Modders	11-13	9-12NOON	MTWTH	\$129	122
113024	Digital Storytelling	11-13	9-12NOON	MTWTH	\$129	1
113018	Beginning Band	Rising 6 th Graders	9-12 NOON	MTWTH	\$79	35
113025	Minecraft Modders	8-10	1-4PM	MTWTH	\$129	122
113026	Lego Comic	8-10	1-4PM	MTWTH	\$129	18
113028	Adventures in Directing Drama	8-11	1-4PM	MTWTH	\$79	35
113027	App Adventures	11-13	1-4PM	MTWTH	\$129	1
113017	Be Your Own Boss	11-13	1-4PM	MTWTH	\$79	27
113211	Afternoon Care	8-13	4-5:30PM	MTWTH	\$30	GYM

WEEK 4 JULY 24-27

Course #	Course Title	AGES	TIME	DAY	FEE	LOCATION
113212	Morning Care	8-13	8-9AM	MTWTH	\$25	GYM
113041	Make Your 1 st 3D Creation	8-10	9-12NOON	MTWTH	\$129	1
113031	Recyclable Art	8-11	9-12NOON	MTWTH	\$79	15
113033	Mathtastic	Rising 3rd-5 th	9-12NOON	MTWTH	69	27
113045	Game Labs	11-13	9-12NOON	MTWTH	\$129	122
113034	Reading from the Middle	Rising 6th-8 th	9-12NOON	MTWTH	\$69	12
113042	Video Games Animation	11-13	9-12NOON	MTWTH	\$129	18
113043	Video Games Animation	8-10	1-4PM	MTWTH	\$129	18
113035	Readership	Rising 3rd-5 th	1-4PM	MTWTH	\$69	12
113044	G2 Girls Gamer Club	9-12	1-4PM	MTWTH	\$129	122
113040	Make Your 1 st 3D Creation	11-13	1-4PM	MTWTH	\$129	1
113036	Mad Math	Rising 6th-8 th	1-4PM	MTWTH	\$69	27
113213	Afternoon Care	8-13	4-5:30PM	MTWTH	\$30	GYM

Parent Signature: _____ Date: _____

<p>Internal use: Student # _____ Date _____ Initials _____</p>
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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 2017 must be read and agreed to 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 last page and return all documents to the address below:

Forsyth Technical Community College

2100 Silas Creek Pkwy

Winston-Salem, NC 27103

ATTN: Tonya Monteiro

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. **NOTE: if your child wishes to play on the gymnasium floor, black rubber-soled shoes are not allowed.**
- 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.

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 Program (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 UNDERSTAND THE FOREGOING AGREEMENTS. 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: _____

Parent Permission

Please initial each of the five statements:

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. _____ I understand my child is not enrolled in the selected classes until payment is submitted.

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 _____
 Parent's Signature _____ Date _____