AGREEMENT TO ABIDE BY PROGRAM EXPECTATIONS AND CAMPUS REGULATIONS

Rules and regulations provide the basis for a reasonably ordered campus life. The mere observance of rules, without the personal appropriation of the values they protect falls short of what the Johns Hopkins University “JHU” hopes for the campus community.

This form should be signed after a discussion is had between parent and child. Return completed forms as soon as possible.

I, ____________________________, allow my daughter/son/ward, ____________________________ (“child”) to attend the following Johns Hopkins University Summer Program(s):

Summer University 2018:
☐ July 2 – August 3

Discover Hopkins 2018:
☐ Session I, June 25 – July 6
☐ Session II, July 9 – July 20
☐ Session III, July 23 – August 3

Mini-Term 2018:
☐ Session I, June 25 – July 6
☐ Session II, July 9 – July 20
☐ Session III, July 23 – August 3

EducationUSA Academy 2018:
☐ July 9-20

☐ Researcher/Scholar/Intern, Enter dates: ____________________________ (must fall between June 25 - August 3, 2018)

My child may participate in organized field trips to labs, monuments, museums, restaurants, shows, sporting events, movies, and the like which might require taking a bus or public transportation. I am aware of the risks inherent in this type of activity, on and off campus, from persons known and unknown and from transportation, residential, and educational settings and I assume those risks. I consent to the use of video/media (including photographs) taken of my child for future university website and marketing materials. My child may receive emergency medical treatment, if necessary in the determination of JHU, while attending the program. I understand that JHU assumes no liability for injury or damages arising from the result of participation unless due to willful fault or gross negligence on the part of the University and I agree to indemnify and defend JHU for damages resulting from my child’s actions.

I hereby approve my child’s participation in the educational program(s) above. To the best of my knowledge, there are no behavioral or other conditions that will interfere with my child’s appropriate participation. I understand that if a JHU or Summer Discovery staff member asks my child to report to the Student Health & Wellness Center or Counseling Center due to actions that are considered to be a danger to the welfare of my child, failure or refusal to comply may result in dismissal from the program. If the Student Health & Wellness Center or Counseling Center deems my child to be a danger to themselves or others, they will be dismissed from the program and released to the custody of a parent/legal guardian.

This is signed knowingly, honestly, and voluntarily.

____________________________
Name of Parent or Guardian

____________________________
Signature of Parent or Guardian

____________________________
Date

____________________________
Name of Student

____________________________
Signature of Student

____________________________
Date

Office of Summer & Intersession Programs - OSIP
3400 North Charles St. | W620 Wyman Park Bdg | Baltimore, MD 21211 | Tel: 410.516.4548 | Fax: 410.516.5585 | JHU Summer Programs