

Covid and Waiver Agreement : Activity Summer Camp

Guardian's First Name _____ Last Name _____ (PLS Print)

Campers First Name _____ Last Name _____ (PLS Print)

Campers Date of Birth: YY/MM/DD __/__/__. Age as of Camp: ____ Gender: ____

Nick Name (If Any): _____

Emergency Contact: In the case of illness or accident, I hereby request and authorize STEAM SCIENCE and ROBOTICS Partners and it's designated Facilitators or Manager to attempt to contact the guardian at the listed number (____) ____-____. If the guardian cannot be reached within 2 minutes, I hereby authorize the camps to transport the child by Ambulance at Guardian's expense to the nearest hospital. All cost will be the responsibility of the Guardian.

Insurance Number _____ Guardian's Name _____ Signature _____

Covid has caused great disruptions, please follow the following:.

- 1- All Students must wear masks.
- 2- All Guardians, Siblings who pick up and drop off must wear masks.
- 3- All Campers must have a temperature check by Guardians before Camp/class each day.
Do not send children if the temperature is above normal.
- 4- All Campers must have a Daily Checklist answered (Link will be provided).
If YES to any question, do not send a child.
- 5- Parents should notify, if your child has been exposed to COVID.
- 6- No Refunds for COVID related issues.
- 7- Parents can Register for Virtual Camp as an alternative to In Person.
- 8- If in person camp is cancelled, we will offer a Virtual Camp the following week.
- 9- No eating or Drinking in Camp or class.

Initials _____

Half Day Morning, Program time is from 9:00 to 11:30 pm, note pick-ups after 11:30 am will be charged \$5.00 per 1 minute.

Half Day Afternoon, Program time is from 12:30 to 3:00 pm, note pick-ups after 3:00 pm will be charged \$5.00 per 1 minute.

Lunch Supervision and food. We only offer ½ day programs this year, parents are welcome to bring them back or have a sitter supervise them during lunch.

Personal Property including Electronics. Parents will not hold STEAM SCIENCE and ROBOTICS Partners or the hosting facilities liable for any loss or damage.

Learning Disabilities, Handicap and /or Behavioral issues: If your child has learning or behavioral issues, please inform the camp administration 2 weeks or more in advance of Registration and note in comments. We will work to accommodate their issues if possible.

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Behavioral issues or problems: We will endeavor to work with all children, but if your child is disruptive, we will call you to intervene twice, and the third time we will ask you to pick up your child, with no refund. Any physical violence between campers will result in both campers being dismissed with no refund.

Publicity Release: Pictures and Videos are taken by staff and participants of both the robots and the campers, some of the pictures will be given to the participants, posted on Social Media like Facebook and others may be used in advertising on our WEB pages, Social Media, Facebook or in Print. I grant to STEAM SCIENCE and ROBOTICS Partners, its representatives, assignees, employees and successors the right to take photographs and videos of my child in connection with the above-identified subject. I authorize STEAM SCIENCE and ROBOTICS PARTNERS Inc., its assignees and transferees to copyright, use and publish the same in print and/or electronically. I agree that STEAM SCIENCE and ROBOTICS Partners and its assignees may use such photographs of my child with or without his/her name and for any lawful purpose, including for example, such purposes as publicity, illustration, advertising, and Web content in perpetuity.

I, the above named participant, am 18 years of age or older and have voluntarily applied to have my child in the above Activity or Trip. I acknowledge that the nature of the Activity or Trip may expose me to hazards or risks that may result in my illness, personal injury, or death and I understand and appreciate the nature of such hazards and risks.

I hereby release the above named Institution, its board (STEAM SCIENCE and ROBOTICS Partners), officers, employees and representatives, in their individual and official capacities, from any liability to me, my personal representatives, estate, heirs, next of kin, and assigns for any and all claims and causes of action for loss of or damage to my property and for any and all illness or injury to my person, including my death, that may result from or occur during my participation in the Activity or Trip, WHETHER CAUSED BY NEGLIGENCE OF THE INSTITUTION, ITS GOVERNING BOARD, OFFICERS, EMPLOYEES, OR REPRESENTATIVES, OR OTHERWISE.

I further agree to indemnify and hold harmless the above-named Institution and its board (STEAM SCIENCE and ROBOTICS Partners), officers, employees, and representatives, in their individual and official capacities, from liability for the injury or death of any person(s) and damage to property that may result from my negligent or intentional act or omission while participating in the described Activity or Trip.

Robot Kits and Computer use: Fees include the use of both the Robot Kits and Computers in the camp or class. Robot Kits and Computers do not go home, and participants must respect and keep track of all the equipment they use or reimburse for the lost parts, Plastic Pieces \$2.00 per piece, electronic \$15.00 per piece and Mother Board \$35.00 per piece. Initials _____

Non-Disparagement, during the duration of this agreement and for 1 year after, the signature agrees not to make or post any disparaging remarks about STEAM SCIENCE and ROBOTICS Partners its management or staff, business practices or policies.

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Discount Coupons: All discounts must be applied at the time of the Order; no discounts will be accepted after the Order is placed and accepted. Only one discount may apply, use of multiple discounts will result in your order being cancelled. No refund will be issued if a coupon is over a 49% discount. These coupons can only be redeemed for the purchase of goods or services from the web site from STEAM SCIENCE and ROBOTICS Partners.

Cancellations: Tuition Fees can be returned up to 2 weeks notification before original program date, scheduled except for 49% plus coupon purchases, there will be no refunds for these, only exchange for another available date if rescheduled 2 weeks before camps. No refund for missed classes.

Governing Law; Limitations; Venue This Agreement shall be governed by the laws of the State of Texas. To the extent allowed by applicable law, any claims or causes of action arising from or relating to this Agreement must be instituted within one (1) year from the date upon which such claim or cause arose or was accrued. Further, any such claim or cause of action shall be brought exclusively in the District Courts of Collin County or federal courts located in Plano, Collin County, Texas, and you agree to submit to the exclusive personal jurisdiction of such courts. You agree to waive any objection that the District or federal courts of Collin County, Texas, are an inconvenient forum.

Sign in and out: All participants under 18 must be signed in and out by a responsible adult.

Adults: All adults 18 years old and older require a background check if they stay in the class more than 20 minutes.

Last day: All participants must complete an inventory of their kits, missing pieces will be charged for, a charge of \$25.00 will be charged for kits that do not get inventoried and signed off by the facilitator.

Change Fee: There is a \$25.00 fee for any date or location or participant change.

Terms are supplemental to the Electronic Contract or in the case of no contract acts as the full contract. Parents or Guardian please sign here.

I agree to follow all terms of the Agreement and;

I HAVE CAREFULLY READ THIS AGREEMENT AND UNDERSTAND IT TO BE A RELEASE OF ALL CLAIMS AND CAUSES OF ACTION FOR MY CHILD'S SICKNESS, INJURY OR DEATH OR DAMAGE TO MY PROPERTY THAT OCCURS WHILE PARTICIPATING IN THE DESCRIBED ACTIVITY AND IT OBLIGATES ME TO INDEMNIFY THE PARTIES NAMED FOR ANY LIABILITY FOR INJURY OR DEATH OF ANY PERSON AND DAMAGE TO PROPERTY CAUSED BY MY NEGLIGENT OR INTENTIONAL ACT OR OMISSION.

Signature _____ Printed Name _____ Date _____