

MEDICATION POLICY, WAIVER AND AUTHORIZATION

Please make every effort to administer your child's medication before or after the program. If your child must take medication during the program, Staff will oversee him/her selfadminister the following medications consistent with this policy and your authorization, so long as you complete and sign this form.

Medications must be in a container bearing a pharmacy label that shows the child's name, prescription number, date filled, prescribing physician's name, name of medication, dosage, and directions for administering. You can request from your pharmacist a second (empty) bottle with the same information so that you have a means of transporting your child's medication.

Unused medication will be returned to you. Medication left behind at the end of the program will be destroyed.

<u>Waiver of Liability</u>: I understand and agree that the program Staff who will oversee your child self-administer medication have no medical background or training. I, on behalf of myself and my child, agree to release, waive, and hold harmless the Smithsonian and its agents and employees, and you assume full responsibility for any risk of loss, damage, death or injury arising directly or indirectly from your child's medications.

<u>Authorization:</u> I agree that you are familiar with the medical condition(s) of my child and I authorize him/her to self-administer the medications consistent with the information you provide in the campers registration profile information.

Immunization

Please submit a copy of your child's most current immunization form with this document.

MEDIA RELEASE

In consideration of your child's participation in the program, you agree to the following:

Release for your Child's Likeness

I understand and agree that the Smithsonian may record your child's participation in the

program. Your child may be photographed, videotaped, audiotaped or otherwise have his or her likeness and voice recorded or documented. I agree that the Smithsonian may use such images and recordings for any educational, promotional, archival, or other standard museum or non-profit purpose, worldwide, in any media now known or later developed, without compensation and without time limitations.

I also agree that the Smithsonian may, in turn, grant the same right to third parties that the Smithsonian deems appropriate, in conjunction with the Smithsonian's activities related to the program. I acknowledge that the Smithsonian is not required to use your child's images or recordings or to make them available to third parties.

Release for your Child's Work

You understand and agree that, during the program, your child may create art, images, costumes, photos, videos, audio recordings, writing and other forms of original or collaborative work ("work"). On behalf of you and your child, you agree that your child's contributions during the program will be your child's own original work and will not include personal information that you or your child want kept private. We recommend that you caution your child about posting personally identifiable information (PII) (e.g. full name, street address, telephone number, email, etc.)

My child and I will own the actual work he or she creates (but not any Smithsonian-owned equipment which he or she uses to create the work) and any copyright in the actual work he or she creates. I agree that the Smithsonian can use all or part of your child's actual work, as well as images or recordings of the work, for any educational, promotional, archival, or other standard museum purpose, worldwide, in any media now known or later developed, without compensation or time limitations.

I also agree that the Smithsonian may, in turn, grant the same right to third parties that the Smithsonian deems appropriate, in conjunction with the Smithsonian's activities related to the program. You acknowledge that the Smithsonian is not required to use your child's work, or to make your child's work available to third parties.

PROGRAM CONDITIONS

Staff will take reasonable precautions to prevent harm to your child during the program; however, your child will be participating in activities and/or using materials that carry an inherent risk of injury or fatality. The risks of participation include using sharp tools such as

mat knives and scissors; using equipment such as 3d printers; exposure to insect bites and participating in running and playing while having recess in the Museum's garden.

Computers/Online Resources

Your child will have access to a computer and online resources during the program. During some workshops, participants will use the Internet to research and using design software. On behalf of me and my child, I agree that my child will not electronically post or save personal information that my child and I want kept private. Again, we recommend that you caution your child about posting PII (e.g., full name, street address, telephone number, email etc.). You acknowledge that program computers are monitored and participants have no expectation of privacy.

Meals/Refreshments

Participants will **<u>not</u>** be provided with *food or refreshments*. Participants are expected to bring their own food meals/snacks during the program. I acknowledge that the Smithsonian cannot control what food may be brought or shared by other participants. The Smithsonian is NOT a nut-free facility and Design Camp is NOT a nut-free program.

Off-site programs

Your child will participate in walkable off-site activities such as sketching in Central Park (across the street) under the supervision of Camp staff.

GENERAL WAIVER OF LIABILITY

I, on behalf of myself and my child, assume full responsibility for any risk of loss, damage, death or injury sustained or caused by my child. To the extent permitted by law, I agree to release, waive, and hold harmless the Smithsonian and its agents and employees from any and all liability for personal injury, death, damage, or loss arising from my child's participation in the program.

I am the parent or legal guardian of ______ ("my child"). I affirm the information provided on this Registration form is complete and accurate to the best of my knowledge. In consideration of my child's participation in the program, I agree to the terms and conditions contained in this Registration and I grant permission for my child to participate fully in the program under the terms and conditions described above.

| Signature: | Date: |
|---------------------------|-------|
| Printed name: | |
| Smithsonian Design Museum | |