

Program Letter for High School Art Intensive

The **Appalachian Center for Craft** is pleased that your child will be participating in **High School Art Intensive** that will be held from **June 9-14, 2024 OR June 23-28, 2024**

If you need to contact your child during this event, please call:

Ashley Lusietto (Appalachian Center for Craft program manager) at 931-372-3051 or cell 608-213-6408

High School Art Intensive (HSAI) is a week-long art intensive program for high school students that provides an immersive learning experience through workshops and activities at the Appalachian Center for Craft.

The Appalachian Center for Craft (ACC), a satellite campus of Tennessee Tech University, is located at 1560 Craft Center Drive in Smithville, TN.

All workshops will be led and assisted by Craft Center instructors and teaching assistants with the goal of providing high quality, enriching and inspiring craft education for all of the participants. Workshops will take place in the craft studios at ACC facilities. Student participants and educators will reside on campus for the duration of the program and all meals will be catered by Chartwells (Tennessee Tech catering).

Complete and return pages 5-10 to the Appalachian Center for Craft by May 15, 2024

Email: Ashley Lusietto, alusietto@tntech.edu

Mail: Appalachian Center for Craft, ATTN: Ashley Lusietto 1560 Craft Center Drive, Smithville, TN 37166

Program Policies (TTU Minors on Campus Policy No. 120)

Overnight Participant Rules (Section VI)

1. The possession or use of alcohol and other drugs, fireworks, and weapons is prohibited.
2. The operation of a motor vehicle by Minors during the Program is prohibited unless required by the nature of the Program.
3. The parking of staff and participant vehicles must be in accordance with Tennessee Tech parking regulations.
4. No violence, including but not limited to sexual violence, will be tolerated.
5. No discrimination or harassment will be tolerated.
6. Hazing of any kind is prohibited. Bullying including verbal, physical, and cyberbullying is prohibited.
7. No theft of property will be tolerated.
8. No use of tobacco products or electronic nicotine delivery systems (vaping) will be tolerated.
9. Misuse or damage of Tennessee Tech property is prohibited. Charges will be assessed against those participants who are responsible for damage or misuse of Tennessee Tech property.
10. The inappropriate use of cameras, imaging, and digital devices is prohibited, including use of such devices in areas where privacy is expected by participants.
11. In-room visitation is restricted to participants of the same gender.
12. Guests of participants (other than a parent/legal guardian and other Program participants) are limited to visitation in the building lobby and/or floor lounges, and only during approved hours specified by the Program.
13. Participants must comply with all security measures and procedures specified by Tennessee Tech Office of Residential Life.
14. Minor participants may not be released to anyone other than individuals listed on their signed and notarized Participant and Information Releases form

Additional Program-Specific Policies

In addition to the requirements specified in Section VI:

1. Written permission signed by the parent/legal guardian for the Minor to reside in Tennessee Tech housing.

2. Curfew is 10pm.
3. In-room visitation is restricted to participants of the same gender.
4. Visitation of guests of participants (other than a parent/legal guardian and other Program participants) is limited to the building lobby and/or floor lounges, and only during approved hours specified by the Program.
5. Participants must comply with all security measures and procedures specified by Tennessee Tech Office of Residential Life.
6. Authorized Adults may not, except in extenuating circumstances, enter a Minor's room, bathroom facility, or similar area without another adult in attendance.
7. Separate accommodations are made for adults and Minors other than the Minors' parents/legal guardians
8. Minors may not leave the property without express written consent from their parent or legal guardian. Minor participants may not be released to anyone other than individuals listed on their Participant and Information Release form.

Program Rules

1. In case of emergency, the minor's parents/legal guardians will be notified by the program manager. Only in extenuating circumstances will the program manager contact the participant via the cell phone number provided.
2. Parents/legal guardians may reach the minor participant at any hour by calling the program manager's office or cell phone: 931-372-6883 or 608-213-6408
3. Parents/legal guardians and participants must complete the following **Participant Information and Releases Form**. If an emergency occurs, the program manager will reach the participant's emergency contact(s).
4. Program activities involving minors are supervised by at least two or more Authorized Adults and have an appropriate ratio of Authorized Adults to participate (at least one Authorized Adult for every twenty-five minors ages 15-17).
5. Participants are expected to be in classrooms and activities listed on program schedule.
6. Participants should travel in pairs and have permission from a chaperone if they wish to jog, walk or hike on Craft Center trails.
7. Participants should travel in pairs when leaving cabins after dark.
8. No one is permitted to enter a bedroom except for the student assigned to that bedroom.
9. Participant medications must be disclosed on the **Medical Information Release Form**.

10. Participants must be between the ages of 15-18.
11. Violation of any rules or policies will result in immediate dismissal from the program.

Packing Suggestions and Housing Information

Packing Suggestions

- Closed-toe shoes are required in all studios
- Cotton or natural-fiber clothing is suggested for hot studios (glass and blacksmithing)
- Clothes that can get stained or dirty
- Hair-ties or clips to tie long hair back during workshops
- Bug spray and sunscreen
- Toiletries

Housing Information

- Cabins are air-conditioned and include two twin beds in each bedroom.
- Bedding, blankets, pillows, towels, washcloths and hand towels are provided for each participant. Toiletries are not provided.
- Each bedroom has its own bathroom with a toilet, sink and shower
- Each instructor or teaching assistant will share a bedroom or have their own bedroom, depending on availability
- Participants will share bedrooms assigned by gender.
- Chaperones will room in their own bedrooms within the same cabins as participants.
- On-site security is available 24 hours a day and may be reached by calling: 931-267-1086

Participant Information and Guardian Authorization Form

Participant's Name: _____

Gender: _____

School/Organization: _____

Teacher/Chaperone: _____

Checklist:

I have read and understand the following sections of the High School Art Intensive Program Letter:

___ Program Policies (TTU Minors on Campus Policy No. 120) and Rules

___ Packing Suggestions and Housing Information

___ Participant Information and Releases

Parent/Guardian Signature

Parent/Guardian Printed Name

Date

Participant Information and Releases

I. GENERAL INFORMATION

Name of Participant: _____

Address: _____

Home Phone: _____

Cell Phone: _____

Date of Birth: _____

Person Responsible for Medical Coverage/Costs: _____

Parent or Legal Guardian: _____

Parent/Guardian Address (if different from Participant's address): _____

Parent's/Legal Guardian's: Home Phone: _____

Work Phone: _____

Cell Phone: _____

Primary Emergency Contact Information:

Name: _____

Address: _____

Telephone: _____

Cell: _____

Secondary Emergency Contact Information:

Name: _____

Address: _____

Telephone: _____

Cell: _____

II. MEDICAL INFORMATION AND AUTHORIZATION

A. Authorization, Release and Indemnification

By signing this document, I grant TTU permission to authorize emergency medical treatment if deemed necessary by TTU. I agree that TTU assumes no responsibility or liability for any injury or damage that might arise out of or in connection with such authorized medical treatment. I further state that I have adequate health insurance necessary or in the absence of health insurance, I will be financially responsible to pay for any medical costs that may be incurred during or arising from my child's participation in this activity. I also agree to indemnify TTU for any liability, including attorney's fees, for any actions brought against TTU for any unpaid medical costs or bills incurred by the Participant.

B. Transportation Permission and Release

I understand that Tennessee Tech University transports participants (hereinafter referred to as "the activity") to:

Appalachian Center for Craft located at 1560 Craft Center Drive, Smithville, TN

I, the undersigned as the parent or guardian of the participant, do hereby give permission for my child to participate in the activity and to be transported to and from the activity site(s) accompanied by a chaperone or parent/guardian. I have been given an opportunity to discuss the activity with my child's educator and/or Appalachian Center for Craft staff. I fully understand the nature of the activity and the risk of injury or loss of property associated with the activity.

By signing this form, I am releasing Tennessee Technological University and its employees from claims made by the child or on behalf of the child should injury or loss of property occur as a result of his/her participation in the activity, except when either Tennessee Technological University or its employees are found negligent in the performance or responsibilities associated with the activity.

I acknowledge that I have read this Permission and Release form and fully understand its contents and the consequences of signing this form.

If you have concerns or questions, contact Ashley Lusietto: alusietto@tntech.edu or 931-372-6883

C. Insurance Information

I understand that Tennessee Tech University does not offer any form of insurance for Participant while participating in Event/Program. Please check the applicable box:

☐

I have insurance and have attached a copy of the *front and back* of the card.

☐

I do not have insurance.

D. General Medical Information

- a. Does participant have any medical condition(s) that you or your doctor feel would limit camp participation? YES NO

If yes, identify and explain:

- b. Is participant currently taking medication that may interfere with ability to safely participate in Program? YES NO

If yes, please indicate the medication and the condition being treated:

- c. Does participant have a history of allergies or reactions to medications, insect stings, or plants? YES NO

If yes, please explain:

- d. Does participant have a history of, or currently suffer from, medical condition(s) of which we need to be aware? YES

NO

If yes, please explain:

- e. Please describe any other conditions of which we should be aware.

- f. Approximate date of last tetanus shot:

III. EARLY DEPARTURE (not applicable to participants 18 years of age or over)

In case of early departure, my child may be released to the custody of the following people:

1. _____
2. _____
3. _____

Minor participants will NOT be released to anyone other than individuals listed above.
Government- issued photo ID must be presented by the individual(s) picking up the Minor(s).

IV. PERMISSION TO RESIDE IN TENNESSEE TECH HOUSING

I give permission for participant to reside in Tennessee Tech Housing at the Appalachian Center for Craft for the duration of the Program.

V. Photo/Video Consent

Intending to be legally bound, I do hereby irrevocably consent to and authorize Tennessee Technological University, its officers, employees and agents, (the “University”) to use existing photographs, photograph, video tape, record, publish, re-publish, broadcast, re-broadcast, adapt, exhibit, perform, reproduce, edit, modify, make derivative works, distribute, display or otherwise use or reuse my name, image/likeness or voice in any media or technology now known or hereafter developed in connection with any product or service or promotional or informational campaign undertaken by the University in all markets as long as there is no intent to use the image, voice and/or likeness in a disparaging manner. University may exercise any of these rights itself or through any successors, transferees, licensees, distributors or other parties, commercial or non- profit.

Signature of Participant's parent or legal guardian **Date**

Printed name of Participant's parent or legal guardian

Signature of Participant if 18 years of age or over **Date**

Sworn to and subscribed before me this _____ **day of** _____
, _____.

Commission Expires:

Signature of Parent or Guardian
Signature



Notary Public

Complete and return pages 5-10 to the Appalachian Center for Craft by May 15, 2024

Email: Ashley Lusietto, alusietto@tntech.edu

Mail: Appalachian Center for Craft, ATTN: Ashley Lusietto 1560 Craft Center Drive,
Smithville, TN 37166