

**Program Letter for High School Art Intensive**  
**May 31-June 5, 2026**

The **Appalachian Center for Craft** is pleased that your child will be participating in the **High School Art Intensive (HSAI)** program that will be held from **May 31-June 5, 2026**.

If you need to contact your child during this program, please call Ashley Lusietto, Program Manager at 931-372-3051.

**About the Program:**

The Appalachian Center for Craft (ACC), a satellite campus of Tennessee Tech University, is located at 1569 Craft Center Drive in Smithville, TN.

HSAI is a week-long summer art program for high school students that provides an immersive learning experience through workshops and activities at the Appalachian Center for Craft.

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

**Check-in is 3 - 4:30pm Sunday, May 31 in the ACC office**

**Check-out is 1 - 2pm Friday, June 5 in the ACC cafe**

**ALL participants under 18 must have a parent or legal guardian sign for them at check-in and check-out. Participants will NOT be released to anyone other than individuals listed on the signed and notarized Participant and Information Releases Form.**

Please read the following HSAI Program Policies and Information on pages 2-5. Complete pages 6-9 and send to the Appalachian Center for Craft by April 30, 2026 via email or mail:

Email: Ashley Lusietto, [alusietto@tntech.edu](mailto:alusietto@tntech.edu)  
Mail: Appalachian Center for Craft, ATTN: Ashley Lusietto  
1560 Craft Center Drive, Smithville, TN 37166

## HSAI Program Policies and Information

### **Participant Rules**

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. Minor participants may not leave the property without express written consent from their parent or legal guardian. Participants may not be released to anyone other than individuals listed on their **Participant Information and Releases form**.
5. No violence, including but not limited to sexual violence, will be tolerated.
6. No discrimination or harassment will be tolerated.
7. Hazing of any kind is prohibited. Bullying including verbal, physical, and cyberbullying is prohibited.
8. No theft of property will be tolerated.
9. No use of tobacco products or electronic nicotine delivery systems (vaping) will be tolerated.
10. 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.
11. The inappropriate use of cameras, imaging, and digital devices is prohibited, including use of such devices in areas where privacy is expected by participants.
12. 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.
13. Parents/legal guardians may reach the minor participant at any hour by calling the program manager's phone: 931-372-6883
14. Parents/legal guardians and participants must complete the **Participant Information and Releases Form**. If an emergency occurs, the program manager will reach the participant's emergency contact/s.

15. 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).

16. Participants are expected to be in classrooms and activities listed on the program schedule.

17. Participants should travel in pairs and have permission from a chaperone if they wish to jog, walk or hike on Craft Center trails.

18. Participant medications must be disclosed on the **Medical Information Form**.

19. Participants must be between the ages of 15-18 and currently enrolled in high school. Recent graduates are not eligible.

20. Participants must wear studio-appropriate clothing and close-toed shoes in workshops.

20. Violation of any rules or policies may result in immediate dismissal from the program.

### **Overnight Participant Rules**

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. 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) 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. Participants may not be released to anyone other than individuals listed on their signed and notarized Participant and Information Releases form.

15. Curfew and quiet time begin at 10pm. Participants must return to their assigned cabins by this time and may use the common area within their cabins. Participants should keep noise to a minimum, using quiet voices and avoiding disruptive activities.

16. Participants 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.

17. Authorized Adults may not, except in extenuating circumstances, enter a participant's room, bathroom facility, or similar area without another adult in attendance.

18. Written permission signed by the parent or legal guardian is required for participants to reside in Tennessee Tech Housing.

### **Studio Attire, Housing Information and Packing Tips**

Required studio-attire:

- Closed-toe shoes are required in all studios.
- Cotton or natural-fiber clothing are required in hot studios (metals, blacksmithing and glass). Synthetic clothing can melt to the skin.
- Wear clothes that can get stained or dirty.
- Tie back long hair during workshops.

Housing information:

- Cabins are air-conditioned and include two twin beds in each room.
- Each bedroom has its own bathroom with a toilet, sink and shower.
- Participants will share bedrooms. Bedrooms and cabins are assigned by gender.
- Chaperones, instructors and teaching assistants will reside in cabins separate from participants.
- Bedding, blankets, pillows, towels and washcloths are provided for each participant.
- Other than a bar of soap, toiletries are not provided.
- On-site security is available 24 hours a day and may be reached in emergency situations by calling 931-267-1086. Call 911 in the event of a life threatening emergency.

Packing tips:

- Sunscreen and bug spray
- Toiletries
- Rain-jacket and sweatshirt (some studios can feel cold in the summer with the AC)

- Reusable water bottle
- Snacks
- Games, books or other activities for free-time

### **Program Schedule**

The following schedule is an example of a typical week at HSAI. Some changes may occur, but generally participants can expect the following:

#### Sunday

- Check-in: 3:00-4:30 PM
- Orientation: 4:30 PM
- Workshop: 5:00 PM
- Dinner & Tour: 6:00-7:00 PM
- Workshop: 7:00-9:00 PM
- Curfew: 10:00 PM

#### Monday through Thursday:

- Breakfast: 8:00 AM
- Workshop: 9:00 AM-12:00 PM
- Lunch: 12:00
- Workshop: 1:00-4:00 PM
- Freetime & Schedule Activities: 4:00-6:00 PM
- Dinner: 6:00
- Scheduled Evening Activities: 7:00-9:00 PM
- Curfew: 10:00 PM

#### Friday, June 13:

- Breakfast: 8:00 AM
- Workshop: 9:00 AM-12:00 PM
- Lunch & Exhibition\*: 12:00 PM
- Check-out: 1:00-2:00 PM

\*Parents are welcome to come early to view the exhibition in the cafe Friday

**HSAI May 31 - June 5, 2026**  
**Participant Information and Releases Form**

**I. GENERAL INFORMATION**

Name of Participant: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Biological Gender: \_\_\_\_\_

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 Phone: \_\_\_\_\_

Secondary Emergency Contact Information:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**II. MEDICAL INFORMATION AND AUTHORIZATION**

**A. Authorization, Release and Indemnification**

By signing this document, I grant Tennessee Tech University permission to authorize emergency medical treatment if deemed necessary by Tennessee Tech University. I agree that Tennessee Tech University 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 Tennessee Tech University for any liability, including attorney's fees,

for any actions brought against Tennessee Tech University for any unpaid medical costs or bills incurred by the Participant.

## **B. Activity Permission and Release**

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 understand that participants will not be released to anyone other than individuals listed on this form. Government-issued photo ID must be presented by the individual(s) picking up the minor(s). I have been given an opportunity to discuss the activity with Tennessee Technological University. 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 Tech 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 Tech 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.

Questions and concerns may be addressed to Ashley Lusietto, Program Manager:  
[alusietto@tntech.edu](mailto:alusietto@tntech.edu).

## **C. Insurance Information**

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

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

☐ I do not have insurance

## **D. Medical Information**

- a. Does the participant have any medical condition/s that you or your doctor feel would limit program participation?      Yes      No  
     If yes, identify and explain:
  
- b. Is the participant currently taking medication that may interfere with the ability to safely participate in the program?      Yes      No

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

- c. Does the participant have a history of allergies or reactions to medications, insect stings or plants?      Yes      No

If yes, please explain:

- d. Does the 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 the 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 Tech 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/Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Parent/Guardian Name

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Participant Name

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

Commission Expires: \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Notary Public Signature

NOTARY  
SEAL