

## **Office of Youth Safety Participant Expectations Form**

Programs/Events/Camps (PECs) hosted and/or endorsed by James Madison University are intended for the positive development of young people. Being safe and secure is the starting point for any learning opportunity. We expect all persons involved (minors, parents, volunteers, and employees) to practice behaviors that foster the total development of all participants. Each participant involved in any PEC involving minors must accept responsibility for creating a positive experience for everyone. Participants and parents/guardians must sign this form acknowledging their having read and understood the document in order to participate. Failure to meet participant expectations may result in disciplinary action, including suspension or dismissal.

### **As a participant I agree to the following:**

1. I will obey all applicable University policies and any and all rules or regulations issued by the PEC Director and the University.
2. I will demonstrate cooperation and respect to PEC staff and participants as well as University employees, students and visitors.
3. I will not harass (verbally, electronically, or through other means) any other individual. I will not knowingly or intentionally physically harm other participants or PEC staff. I understand that hitting, pushing, kicking, fighting, bullying, and other behavior which may harm another person will not be tolerated.
4. I will respect the property of other participants, PEC staff, and James Madison University. I will not take anything that does not belong to me. I will not knowingly or intentionally deface or destroy campus property, the property of others, or nature.
5. I will follow all the safety rules and regulations given for each activity in which I participate. This includes, but is not limited to, following the rules regarding curfew, lights out, and being at my assigned activity at the assigned time.
6. I understand that the possession and use of illegal drugs, alcohol, or tobacco at a PEC is unacceptable and prohibited.
7. I understand that any medication which I require to treat a medical condition will be documented; must be stored in the original packaging and clearly labeled; and is not permissible to be shared.
8. I understand that I should inform PEC staff of any personal injury or medical condition which could affect my ability to fully participate.
9. I understand that I must inform PEC staff if I am having a problem with, or feeling threatened by, another participant, a member of the PEC staff, or anyone I encounter.
10. I understand that I must wear appropriate clothing each day, and that what clothing is deemed appropriate or inappropriate is at the discretion of PEC staff.
11. I understand that weapons, look-alike weapons, or objects that may be used to threaten, intimidate, or harm others or to damage property may not be brought to a PEC. Any object that may hurt or place another person in fear of his/her safety may be considered a weapon.

# PARTICIPANT CONDUCT AGREEMENT

Program//Event/Camp (PEC)Name: \_\_\_\_\_

Date(s): \_\_\_\_\_

Time(s): \_\_\_\_\_

Participant Preferred Name: \_\_\_\_\_

(hereafter "Participant")

Parent/Guardian Full Name: \_\_\_\_\_

PEC has established rules and expectations for all Participants. It is the responsibility of the Parent/Legal Guardian and the Participant to review the PEC rules and expectations and to go over them with children attending the PEC. Dismissed Participants are not eligible for a refund of any fees or expenses. The Parent/Legal Guardian is responsible for all costs associated with removing the Participant from the PEC due to his/her misconduct, including but not limited to transportation costs to return the Participant home.

## PARTICIPANT AGREEMENT

I understand that as a condition for participating in the PEC that I must comply with the PEC rules and expectations and follow all directions of the PEC staff. Failure to comply with the PEC rules and expectations or failure to comply with the directions of PEC staff may result in my dismissal from the PEC with no refund.

Participant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## PARENT/LEGAL GUARDIAN AGREEMENT

I have received and read the Participant Expectations provided by the PEC. I have assisted my child in understanding the above rules, and requirements. I understand that my child will be subject to the expectations and standards of the PEC and James Madison University. I further understand that my child's violation of the rules and expectations, or failure to comply with the reasonable direction of PEC staff, may result in my child's dismissal from the PEC. I accept responsibility for all costs associated with removing my child from the PEC, including but not limited to transportation costs to return the Participant home.

Parent/Legal Guardian's Signature: \_\_\_\_\_

Date: \_\_\_\_\_