## A Taste of Swarthmore Overnight Visit Policy & Permission Form for Swarthmore College

This is required for all visiting students and must be emailed to <a href="https://hosting@swarthmore.edu">hosting@swarthmore.edu</a> or faxed to 610-328-8580 no later than 5 business days prior to your visit. You will not be permitted to stay overnight without this form.

As a guest, Swarthmore College requires that you assume the same responsibility for your actions that Swarthmore students have assumed. Please read the following statement and sign your name to indicate that you understand the statement. If you do not understand the statement or how it applies to you, please ask a member of the Admissions staff to explain it to you before you sign.

## For Students:

- I am aware that although Swarthmore College has agreed to host me overnight, neither the Office of Admissions nor any other office or personnel of Swarthmore College will be supervising me at all times during my stay on campus. I, like enrolled students, am responsible for my behavior as an adult within the expectations described below. I am aware that I am required to abide by the Swarthmore College Student Code of Conduct while I am participating in the admissions event. I am further aware that, if I do enroll at Swarthmore College, any of my conduct during my participation in this program that is later determined to have violated the Student Code of Conduct, will be subject to disciplinary review and action. I am also aware that even if I do not enroll at Swarthmore College, the College will make a record of the reported violation and any subsequent investigation. The Swarthmore College Student Code of Conduct is available at: http://www.swarthmore.edu/student-life/student-handbook/student-code-of-conduct-rules-and-regulations.xml.
- I am aware that participants in on-campus visitation programs are required to abide by Pennsylvania state law and the rules and regulations of student contact that govern students enrolled at Swarthmore College. I acknowledge that Pennsylvania law prohibits the drinking of alcoholic beverages by persons under 21 years of age, and forbids the use of controlled substances.
- Further, I understand that any negative behavior during my campus stay will be considered by the Admissions Office. Any violation of the rules stated above or any damage to Swarthmore property may impact my application to Swarthmore College.

## For Parents:

- Permission and Release: I give permission for my child, named below, to visit Swarthmore College and to participate in the Taste of Swarthmore program. I release and give up all claims, including claims of negligence, that I or my child now has or may have in the future against the Swarthmore College, its affiliates, its agents, and employees, including the College's Board of Managers, Directors and Officers, administration, faculty and staff, arising out of my child's participation in this activity. I also understand that my child's participation is on a completely volunteer basis. I make this decision by choice and my child's participation in this activity is undertaken knowing that risks may be involved. I understand that Swarthmore College does not assume any risk or liability due to my child's participation in this activity. I understand this Release applies to all claims for property loss, injury or illness, or death or any other damages suffered by me or my child, now or in the future, as a result of my child's participation in the activity.
  - **Binding:** This Release binds me, my heirs and personal representatives. I understand that it benefits the heirs, personal representatives or successors and assigns of the Party Released.
- In case of emergency, and if I cannot be reached, I, the undersigned parent or guardian of the below-named child, do hereby authorize a representative of Swarthmore College to consent to any medical treatment or care deemed advisable. I understand that no medication will be given to my child and that health care is not available to the child on the premises. In the event of an emergency, 911 and emergency contacts will be called to respond.

By signing below, we acknowledge that we have read and fully understand the Permission and Release provisions; we have read and agree to comply with the Visitation Policy described above; and that we also understand and agree to abide by the Swarthmore College Student Code of Conduct during participation in this program.

Signature of Parent/Guardian	Date	
Signature of Student	Date	

Student Information:			
Name of Student:			
Date of Birth:		Gender:	
Home Address:			
City:		Zip:	
Phone (Check Preferred) 🗖 Home	Cell:_		
Email Address:			
High School Name:	<del></del>	High School State:	
Interested Majors:			
Do you request to be hosted by a student you al			
If yes, name of the student:		Class year	
Have you been in communication with a coach a If yes, what sport?	about playing a sport at Swa		
Please list medical conditions, allergies, medica	tions required, & accommod	lations requested here:	
Please note: Swarthmore College employees wil available to the child on the premises. In the evento respond.			
Parent/Guardian Information:			
Name of Parent or Guardian:			
Home Address:			
Business Address:			
Phone Numbers: Daytime:			
Email Address:			

Please return this form to the Admissions Office no later than 5 business days prior to your visit.

Email: <u>hosting@swarthmore.edu</u>

Fax: 610-328-8580

If you have any questions, please contact the Admissions Office by telephone at (610) 328-8300. Thank you for your time. We look forward to hosting you at A Taste of Swarthmore!