

**Texas State University**  
Student Trip Release and Indemnity Agreement

Students' Name: \_\_\_\_\_  
Sponsoring Student Organization or Department: Cat Camp  
Academic Year: 2017-2018

I plan to engage in university-sanctioned travel activities during the academic year indicated above in association with the above listed organization. I am traveling entirely upon my own initiative, risk, and responsibility.

In consideration for the permission given to me by Texas State University to take this trip and in further consideration for Texas State University and the organization named above facilitating this trip, I (for myself, my heirs, executors, and administrators) release, discharge, and agree to indemnify Texas State University, the organization's advisors and all of the university's agents and employees who have facilitated this trip, acting officially or otherwise, from any claims on account of any injury to me or for damages to my property that occur from any cause in connection with this trip. I intend that the indemnity provided for in this agreement is indemnity by me above to indemnify Texas State University-San Marcos and its agents and employees from the consequences of their negligence, whether that negligence is the sole or concurring cause of the death, injury or damage.

Dated this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Parent or Guardian's Signature, if student is under 18

# Cat Camp 2017 Policy & Conduct Agreement

The mission of Cat Camp is to orient new students to Texas State University, teach them Bobcat traditions, help them connect with fellow students and develop a network of friends at Texas State. We support their successful transition to Texas State University, and it is in this spirit that we make this policy and behavior agreement for Cat Camp 2017.

## **Policy:**

All members are expected to abide by University policies and regulations as dictated by the Texas State Code of Student Conduct, and all federal, state and local laws. In addition, members are expected to abide by Cat Camp and Camp Young Judaea rules, policies, and all instructions presented by University and Conference staff members, Cat Camp Advisors, Directors and Counselors, whether written or verbal.

Cat Camp is an alcohol, smoking and illegal substance free program. Being under the influence and/or use of alcohol or any kind of illegal drug is strictly prohibited. As a participant in Cat Camp, I agree to abide by the substance free policy, and understand that if I violate this policy or any others as stated above, I may be immediately removed from Cat Camp at my own cost.

## **Behavior:**

As a Bobcat, it is imperative that we hold ourselves to a higher standard. Behavior expectations for Cat Camp go beyond the policies of the organization and align themselves with the mission of Texas State University. As a participant in Cat Camp, I agree to display decency, appropriateness, and acceptable conduct, and understand that if I violate this behavioral expectation, I may be immediately removed from Cat Camp at my own cost.

In addition to being removed from camp, alleged policy and behavioral violations will be reported to Texas State University and/or local law enforcement. Furthermore, any violation of Cat Camp policies and behavior expectations may affect my status at Texas State University. The first thing to learn about being a Bobcat is that you are a Bobcat everywhere you go and we ask that you represent the University well.

By signing below, I am stating that I have carefully read and understand the provisions stated above and I agree to be bound thereby.

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Printed Name

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Signature

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Date

TEXAS STATE UNIVERSITY  
Authorization for Medical Treatment

Name: \_\_\_\_\_ SSN#: \_\_\_\_\_

I give permission to use transportation provided by Texas State University and to participate in this Texas State University travel-related activity. He/She has my permission to participate in all activities related to this event.

I also give permission to an authorized Texas State University representative to furnish such minor medical care as my son/daughter may require. Further emergency treatment, i.e. treatment in the event of serious illness/injury or the need for hospitalization and/or major surgery, is granted, conditional upon understanding that the Texas State representative will use all reasonable efforts to contact the emergency reference names herein. Failure of such efforts, however, should not prevent the representative from providing such emergency treatment under the care of the physicians contacted by the representative of Texas State as may be necessary for the best interest of the life of the student listed above. I further understand and agree that Texas State are not legally liable, financially or otherwise for such emergency treatment (minor or serious).

Please complete the section below.

Name of Insurance Company: \_\_\_\_\_ Policy # \_\_\_\_\_

Name of Family Physician: \_\_\_\_\_ Phone # \_\_\_\_\_

In case of emergency, contact \_\_\_\_\_

Work# \_\_\_\_\_ Home# \_\_\_\_\_ Relation to student \_\_\_\_\_

Second Contact \_\_\_\_\_

Work# \_\_\_\_\_ Home# \_\_\_\_\_ Relation to student \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature (Parent or Guardian, if student is under 18)