REGISTRATION INFORMATION:

PROGRAM I: July 24-25  REGISTRATION DEADLINE: July 17
PROGRAM II: August 7-8  REGISTRATION DEADLINE: July 31

To make your reservation for College & Careers, please complete and return the Registration Form, Waiver of Liability/Medical Permission, Behavior Contract, and your check or money order by the deadline above to:

Rochester Institute of Technology, Undergraduate Admissions Office, Bausch & Lomb Center, 60 Lomb Memorial Drive, Rochester, NY 14623-5604.

You can also register online at: http://admissions.rit.edu/careers/. Visa and Master Card accepted.

Some workshops will be offered in either July or August. Please check the session descriptions to ensure that you have selected the correct workshops and program to attend. Space is limited, and reservations will be honored on a first-come, first-served basis.

REGISTRATION FEE: (please make checks payable to: RIT)
$145 – Two-day program, meals, and overnight accommodations
$135 – Two-day program and meals only (without overnight stay)

ADDITIONAL FEES FOR FAMILY:
$9.00 per person pre-purchased for lunch on Saturday at Grace Watson Dining Hall (optional)

OTHER THINGS TO KNOW:

Accommodations: Overnight accommodations are available for students in our campus residence halls. Rooms are assigned, and room keys will be distributed at Check-In.

Roommates: Roommates will be assigned during Check-In. We will be happy to accommodate specific roommate requests at that time.

If you are staying in our residence halls: You will be lodged in double rooms with standard twin-sized beds. Bedding is not provided. So plan to bring either twin sheets and a blanket or a sleeping bag and your own pillow/pillowcase, small fan and water bottle (optional – residence halls are not air-conditioned), alarm clock, towel, and toiletries.

Students often ask what else to bring, here’s a helpful list:
* Comfortable walking shoes – you’re going to cover a lot of ground while you’re here!
* An umbrella – we’ll put the request in for great weather, but you just never know!
* Athletic clothing and shoes if you plan to use our recreation facilities on Friday night (sneakers, shorts, t-shirt, bathing suit).
* Closed-toe shoes for the Saturday academic sessions, these are hands-on and interactive sessions, so be prepared!

Questions about College & Careers? Contact the RIT Undergraduate Admissions Office at 585-475-6631, Monday - Friday 8:30am - 4:30pm EST or by e-mail at: admissions@rit.edu.
REGISTRATION FORM

I plan to attend College & Careers during:

☐ Program I: July 24-25         ☐ Program II: August 7-8

Check One:

☐ I plan to spend the night on campus. Enclosed is my check for $145, signed Behavior Contract, and signed Waiver of Liability/Medical Permission Form.

☐ I do not plan to stay overnight. Enclosed is my check for $135, signed Behavior Contract, and signed Waiver of Liability/Medical Permission Form.

Student Name: ____________________________

Date of Birth: ___________ ☐ Male ☐ Female Phone: (_____) __________________

Address: _______________________________________________________________________

City/State/Zip: _________________________________________________________________

Student e-mail: _________________________________________________________________

Current High School: ____________________________ Graduation Year: ___________

Parent Name: __________________________________________________________________

☐ Please check if you, or someone accompanying you, has a hearing loss that requires sign-language interpreting services or real-time captioning (2 weeks advance notice is needed)

Please list, in order of preference, six sessions:

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☐ My family plans to attend the continental breakfast and information session on Saturday morning. _____ (#) will attend. (Complimentary)

☐ My family plans to have lunch at the Grace Watson Dining Hall on Saturday afternoon. _____ (#) will attend. Please include an additional $9.00 per person. (Note: Student participants’ meals are included in the registration fee).

Parent Academic Sessions (OPTIONAL)

If you are interested in learning more about the degree programs available at RIT, you may attend optional academic sessions for parents. Please see page 13 for available sessions and list your session choice(s) below.

List Session Letter & Name:

I _______ ________________________________________________________________

II _______ ________________________________________________________________

III _______ ________________________________________________________________

Please check if you, or someone accompanying you, has a hearing loss that requires sign-language interpreting services or real-time captioning (2 weeks advance notice is needed)
WAIVER OF LIABILITY / MEDICAL PERMISSION

Please complete, sign and return along with the Registration Form and Behavior Contract. All students (resident and commuter) must have these forms on file with the Admissions Office before arriving at College & Careers.

1. I, ________________________________________, am the parent or legal guardian of ______________________________________. I give permission for my child, ______________________________________, to participate in College & Careers (hereafter referred to as “activity”) occurring on ________________________ , 2015. This activity will involve recreational programs, games and athletic events that may involve inherent risks of participation.

2. In consideration for such participation, I, on behalf of myself, my child, my assigns, executors, and heirs, release, indemnify and hold harmless Rochester Institute of Technology (“RIT”), its trustees, officers, agents and employees from any and all liability, damage, expense and/or claim of any nature whatsoever arising out of or in any way related to my son/daughter’s participation in this activity or while he/she is on the premises of RIT for this activity.

3. I acknowledge that my son/daughter is free from any illness, injury or condition which would limit any and all participation in this activity.

4. Medical Authorization; I give permission for my son/daughter (print child’s full name) , ______________________________________, to be treated by the staff of RIT, RIT Ambulance and/or by any medical professional for medical illness and injuries, and give them permission to take emergency measures as they deem appropriate. I accept full responsibility for any medical expenses incurred as a result of these actions.

5. In signing this agreement, I acknowledge that I have read this waiver and the College & Careers brochure, and I agree to be bound by their terms. I further acknowledge that I am the parent or legal guardian of the student, and that I sign this agreement voluntarily.

(         )
Parent or Guardian Signature                        Date                    Emergency Phone #

Address                                                              City                               State  Zip

Parent email

________________________
Health Insurance Policy Holder Name       Insurance Company Name       Policy Number

Mail to: RIT - Admissions Office - 60 Lomb Memorial Dr - Rochester, NY 14623 or Fax to (585) 475-7424
BEHAVIOR CONTRACT

College & Careers has a strong history of safe and informative programming. A positive experience is fostered by the following guidelines, which help ensure that all participants treat one another and RIT with respect. In addition to complying with all federal, state and local laws, participants are expected to comply with the guidelines below:

RIT CONDUCT CODE (excerpts)

Alcohol: The consumption or possession of alcoholic beverages is prohibited in all RIT residence halls regardless of age or circumstances.

Drugs: RIT explicitly prohibits use, possession, sale, manufacturing or trafficking of illegal drugs on RIT property. Federal, state and local laws regarding drug use apply.

Theft: Attempted or actual unauthorized possession of RIT property or other personal or public property is prohibited.

Vandalism: Attempted or actual damage to or alteration of RIT property or other personal or public property is prohibited.

Fire Safety: Setting a fire, causing a false fire alarm, or causing an unreasonable situation that creates a fire safety hazard is prohibited.

Sexual Misconduct: All forms of sexual misconduct, including any form of unwanted sexual contact, are expressly prohibited.

Endangering Behavior: Conduct that threatens or endangers the health and/or safety of a person(s) including but not limited to exiting a building through the window or the throwing of objects out the window is prohibited.

COLLEGE & CAREERS CONDUCT CODE

Leaving Campus: College & Careers participants are not allowed to leave campus during the program unless prior arrangements have been made between the student, parent and College & Careers program coordinator. This excludes students who have designated themselves as “commuter” students.

Leaving Residence Halls: College & Careers participants are not allowed to leave their residence halls between the hours of 11:30 PM and 7:00 AM (except in case of emergency) and must be in their assigned rooms by 1:00 AM. All entrances to the residence halls will be locked, for safety, and guests will not be issued main door keys.

Commuter Students: Programming on Friday night ends at 11:00 PM for commuter students and they are required to leave campus at that time. A commuter student is one who has not indicated a need for overnight accommodation on-campus.

Quiet Hours: Quiet hours are established between 11:00 PM and 7:00 AM. Conduct that breaches the peace of the community is forbidden.

Smoking: Smoking is prohibited in any indoor area at RIT during College & Careers. This includes, but is not limited to, residence hall rooms, lounges, the Student-Alumni Union, and the Gordon Field House.

Keys & Meal Cards: You will be issued a room key and meal card upon check-in. There is $85 charge for any key that is not returned by check-out, and a $5 charge for any meal card that is not returned by check-out.

ACTIONS

Any participant of College & Careers exhibiting any of the behaviors listed above may be subject to one or more of the following actions. The parent(s) or guardian(s) may be contacted. The student may be removed from the program.

Student Signature: ____________________________

Parent/Guardian Signature: ____________________________