2016 STARTALK Summer Camp

Monkey King: Journey to the West

Thank you for your interest in the STARTALK Summer Camp!

Contact Rex Burnett at 918-660-3497 or rexburnett@ou.edu for any questions regarding the application process.

To: Rex Burnett
East Asia Institute (EAI) Confucius Institute
The University of Oklahoma-Schusterman Campus
4502 East 41st Street
Tulsa, OK 74135

Application Checklist

Please make sure you have completed the following items before submitting your application:

- Registration Form
- Parent Consent and Talent Release Form
- Tuition Waiver Form (if applying for financial assistance)

No tuition! Funded by the NSA. Applications due by April 15th 2016

There will be a TBD evening orientation meeting prior to the camp in Tulsa.

3rd-5th grade camp

Monday, June 13th to Tuesday, June 28th, weekdays
9AM - 3PM OU-Tulsa Schusterman Campus Learning Center
4502 East 41st Street, Tulsa, OK 74135
2016 STARTALK Summer Camp

East Asia Institute (EAI)
Confucius Institute (OUCI)
OU-Tulsa Schusterman Campus
4502 East 41st Street
Tulsa, OK 74135

REGISTRATION INFORMATION

STUDENT’S PERSONAL INFORMATION

Student Name _________________________ DOB _____________ Gender ________

Home Phone ___________________ Cell Phone ____________________

Home Address __________________________________________________

City _____________________ State ___________ Zip _______________

Email Address __________________________________________________

STUDENT’S ACADEMIC/CHINESE STUDY INFORMATION

School Name ___________________________ Grade _________

City _____________________ State ___________ Zip _______________

GPA ________________________

Chinese Teacher’s Name (if applicable): _______________________

Chinese Teacher’s Email Address: (if applicable) _______________________

How long have you been studying Chinese: _______________________

Your Chinese Proficiency (Basic, Intermediate, Advance): _____________

T-Shirt Youth Size (circle one): Small Medium Large XL
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STUDENT’S MEDICAL INFORMATION

Please mark whether the following apply:

Medical Restrictions (check one): ☐ Yes  ☐ No
If yes, please explain: ____________________________

Current Medications (check one): ☐ Yes  ☐ No
If yes, please explain: ____________________________

Dietary Restrictions (check one): ☐ Yes  ☐ No
If yes, please explain: ____________________________

Allergic Restrictions (check one): ☐ Yes  ☐ No
If yes, please explain: ____________________________

Physician’s Name: ____________________________    Physician Phone Number: __________________

STUDENT’S PARENTS/GUARDIAN INFORMATION

Name ________________________________    Home Phone ________________________________
Cell Phone ____________________________    Office Phone ________________________________
Home Address ____________________________________________________________
City ____________________________    State ___________    Zip ________________
Email Address ________________________________________________________________
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EMERGENCY CONTACTS INFORMATION

Contact #1:
Name _____________________________ Phone __________________________
Address ________________________________________________________________
City _____________________ State ___________ Zip _______________
Email Address ____________________________________________________________

Contact #2:
Name _____________________________ Phone __________________________
Address ________________________________________________________________
City _____________________ State ___________ Zip _______________
Email Address ____________________________________________________________
CONSENT AND TALENT RELEASE FOR THE UNIVERSITY OF OKLAHOMA

MINOR’S RELEASE AND ACKNOWLEDGEMENT OF RULES AND GUIDELINES

This Release is executed and acknowledged on the _____ day of __________________ , 2015,

______________________________ of ___________________________, __________________

(Minor’s Name)                                 (Home Town)                            (State)

hereinafter referred to as “Releasor” or “Minor” for good and valuable consideration does for himself/herself and personal representatives, heirs, assigns and next-of-kin, and on behalf of Minor, hereby release, waive, forever discharge, indemnify and covenant not to sue the Board of Regents of the University of Oklahoma, its officers, members, employees, volunteers, agents and representatives, hereinafter collectively referred to as ‘Releasees,” and agrees to hold harmless, defend and indemnify the same, for any and all loss, damages, claim, demand, action or right of action of whatsoever kind of nature, either in law or in equity, arising from or by reason of any personal injury, known or unknown, death and/or property damage resulting or to result from participation in the 2016 STAR-TALK Chinese Language Camp whether sponsored by The University of Oklahoma a or third party (collectively referred to as the “Activity”, “Program”, or “Camp”).

I know the nature of the Activity and the Minor’s experience and capabilities and consider Minor to be qualified to participate in the Activity. However, I acknowledge that there are certain risks of physical injury or illness associated with the Activity. Further, I recognize and acknowledge the potential risks and dangers involved in such an Activity and its related activities including travel and transportation associated with the Activity and any related field trips and other Program activities which may include personal injury, death, and/or property damage. I acknowledge and hereby state that Minor’s participation in this Activity is entered into as a free and voluntary act and is in no way connected with any course credit or requirements of the Releasees. I acknowledge that I have read the OU rules stated herein or as otherwise advised at the time of the Activity, and as published on the University’s websites, www.judicial.ou.edu and www.ou.edu/home/misc.html, and understand and agree to abide by all University and Activity rules and policies. Failure to comply with these rules or any other rule established by the Camp/Activity may result in Minor’s immediate removal from the camp/activity. I waive any claim for refund or any other contract right upon removal.
I recognize that the Releasees do not assume responsibility or liability for - including costs and attorney's fees--any accident or injury or damage resulting from any aspect of participating in the Activity. The Releasees are not liable for any special, incidental, or consequential damages arising out of or in connection with any aspect of participation in the Activity.

I certify that I have read and understand the Activity rules and have explained said rules to Minor. I hereby certify that I am the parent and/or guardian of said Minor and that the above and foregoing matter has been fully explained to me and Minor, and I, for and on behalf of said Minor, do hereby release all liability, indemnify and covenant not to sue as set forth in the body of the RELEASE above, with the same force and effect as if executed by me. Further, as parent and/or legal guardian of said Minor, I hereby give consent and authorize said Program, the University of Oklahoma and its agents, representatives and employees to secure emergency medical treatment for said Minor while said Minor is in attendance at said Program conducted by The University of Oklahoma and that I am responsible for any and all costs associated with the transportation and treatment.

This Release contains the entire agreement between the parties hereto and the terms of this Release are contractual and not a mere recital. Releasor further states that s/he has carefully read the foregoing Release and Acknowledgement as his/her own free and voluntary act.

I understand that The University of Oklahoma, from time to time produces promotional material relating to its programs. I understand that as a participant and/or a spectator at the Camp/Activity that Minor may be included in videotapes or photographs taken during the Camp/Activity. Therefore, without reservation or limitations, I, in my own behalf and on behalf of the Minor, hereby assign, transfer and grant to The University of Oklahoma, its successors, assignees, licensees, sponsors, any television networks, and all other commercial exhibitors the exclusive right to photograph and/or videotape the Minor and to utilize such videotapes and photographs and Minor's name, face likeness, voice and appearance as a part of the Camp/Activity, in advertising and promoting the Camp/Activity or in advertising and promoting similar future events at no charge.
I stand and agree to notify the Camp supervisor Rex Burnett at 918-660-3497 immediately of any injuries sustained by Minor as a result of the Activity and of any inappropriate behavior experienced by Minor related to the Activity. I also understand and agree that should any issues of sexual misconduct, harassment or assault occur, I will immediately report those to both the Camp supervisor, Rex Burnett at 918-660-3497 as well as the University’s Sexual Misconduct Officer, Kathleen Smith at 405-325-2215, www.ou.edu/home/misc.html.

I certify and agree that I am to pick-up and drop-off Minor only at the designated places and times. Should I fail to timely pick-up Minor at the designated area, I understand he/she will stay at the Activity site with Camp supervisor. Failure to timely pick-up Minor may result in his/her immediate withdrawal from the Activity.

I understand that by signing this document, I give up substantial rights that I or the Minor would otherwise have to recover damages for any loss occasioned by Releasees’ fault, and I sign it voluntarily and without inducement.

Date ___________________

Parent/Guardian Signature _________________________________________

Releasor’s (Minor’s) Signature _________________________________________

School Name__________________________________________________

Birth Date: ____________________

Address of Parent and/or Legal Guardian: ________________________________

City__________________________    State__________    Zip_________________

Home Phone: ___________________    Work Phone: ______________________

Cell Phone: ___________________    Email address: ________________________

Emergency Contact (if parent or guardian cannot be reached) THIS INFORMATION IS REQUIRED

Contact___________________________________________________________

Phone____________________________________________________________
Student’s Name: ___________________________________

Camp Location: ________________________________

CLIENT (Department): University of Oklahoma’s East Asia Institute and Confucius Institute (STARTALK)

JOB NAME: Photography for departmental publications including but not limited to the department’s website, promotional brochures, newsletters, postcards, etc.

For the consideration received, including but not limited to publicity, the adequacy of which is hereby acknowledged, I hereby grant to the Board of Regents of the University of Oklahoma, their successors and assigns, and those acting under their permission, or upon their authority, or those by whom they are commissioned:

(1) The unqualified right and permission to reproduce, copyright, publish, circulate and otherwise use photographs and/or motion pictures of me, and voice reproduction, whether taken in a studio or elsewhere, in black-and-white or in colors, alone or in conjunction with other persons or characters, real or imaginary, in any part of the world. I hereby waive the opportunity or right to inspect or approve the finished photographs, films or tapes or the use to which it may be put or the copy or illustrations used in connection therewith. This authorization covers composite, stunt, comic, freak or any unusual photograph and/or motion picture, or voice reproduction, caused by optical illusion, distortion, alteration or made by retouching or by using parts of several photographs or by any other method. All such use shall be for the purpose of promoting, supporting or otherwise furthering the mission of the University.

(2) All my right, title and interest in and to all negatives, prints, tapes, and reproductions thereof, and I do hereby release the aforesaid parties and their successors and assigns, if any, from any and all rights, claims, demands, actions or suits which I may or can have against them on account of the use of publication of said photographs and/or motion pictures or tapes. I have read and understood the release stated above and do hereby agree to its terms and conditions.

STUDENT’S (GUARDIAN’S) SIGNATURE ______________________

DATE_______________________
QUESTIONS (PLEASE ATTACH ANY ADDITIONAL SHEETS AS NEEDED)

1. What awards, or recognitions have you received? List those achievements specifically related to your academic study.

2. Please describe activities and/or work experience other than those directly related to your school experience. You may list community service, church work, part-time or full-time employment.

3. Write a short essay about yourself explaining your family background and why this scholarship is so valuable to you.

CERTIFICATION:

I certify that all the information included in this application is true and complete. I hereby grant permission to the Confucius Institute at the University of Oklahoma (OUCI) to verify such information and to release information to the donor or potential donor of any scholarship for which I may be eligible.

_____________________________________________  _________________________________________________
Signature                                      Date