



Tata Consultancy Services

goIT High School Student Summer Camp

Seven Hills Park, 1000 Summit Dr, Milford, OH 45150
June 11th, 12th, and 13th 2019

“goIT” is a student summer camp with three days of hands on workshops designed to generate an interest in a technology career path among local high school students. Students will be provided with lunch every day. On the 13th all parents and guardians are invited to join us at Seven Hills Park at 5:00PM for an award ceremony.

Questions and inquiries please contact: Steven Baron, 513-677-7321 or steven.baron@tcs.com

Participant Information

Name: _____ Phone: _____
Address: _____ Participant Email: _____
City: _____ Date of Birth: _____
State: _____ Grade Level: _____
Zip/Postal Code: _____ School: _____

Adult T-Shirt Size:

Small Medium Large XL XXL 3XL

Allergies and Pre-Existing Conditions: _____

Parental/Guardian Email

I would like to receive emails regarding the goIT Program Yes No Email: _____

Guardian Permission/Release

I am the parent or legal guardian of the participant named above. I hereby release Tata Consultancy Services, their agents and employees from any and all liability for all personal injuries known or unknown that the participant named above may incur while in the Camp including but not limited to by participating in activities conducted, sponsored, or associated with the event stated above.

In the event of an emergency I, or my child’s emergency contact, may be reached at the following telephone numbers:

1st # _____ 2nd # _____

Also, in the event that I cannot be reached in the case of emergency, I do hereby authorize a physician selected by the coordinator of this event to administer emergency treatment including medications, diagnostic tests, surgery, or other medical intervention deemed necessary by the physician. I have enclosed herewith a list of medications for which my child/ward is allergic to and I hereby authorize Tata Consultancy Services to release it to the physician emergency medical team.

I, the undersigned, have read this release and understand all its terms. I excuse it voluntarily on behalf of myself and the participant named above and with full knowledge of the significance to bind all persons. In witness whereof, I have signed this release on the date indicated below.

I, the undersigned, give permission to Tata Consultancy Services to make or use pictures, slides, digital images, or other reproductions of me, or my child or of materials owned by me or my child, and to put the finished pictures, slides, or images to use without compensation in productions, publications, on the web, or other printed or electronic materials related to the role and function of Tata Consultancy Services. Your information will not be shared with any organization outside of TCS.

Is your child required to be signed in/out of the camp each day? Yes No _____

If yes, Please provide a list of persons that will be signing in and signing out your child each day on the back of the permission slip.

If no, please sign by the ‘X’ to grant TCS permission to allow your student permission to check himself/herself out at the end of each day

Name (please print clearly): _____ Relationship: _____

Signature: _____ Date: _____