

Participation Agreement Form

2022 In-Person EUREKA! Summer Honors Research Program

I, _____
Name (PLEASE PRINT)

On behalf of myself and my heirs, I do hereby agree to fully participate in the 2022 In-Person EUREKA! Summer Honors Research Program through Clemson University including, but not limited to:

- Daily research as instructed by my faculty mentor
- Research team meetings as instructed by my faculty mentor
- Meetings, activities, and events listed on the 2022 EUREKA! program itinerary as well as any required meetings added later

I acknowledge that if I do not participate fully in these events, I will not be refunded any fees for 2022 In-Person EUREKA! or have any amount added to my TigerStripe account.

I understand I will be asked to turn my camera on during official EUREKA! video conference events.

I also agree to conduct all virtual and in-person meetings (daily research, team meetings, group activities, etc.) in a safe and undistracted manner including not driving while participating in any virtual EUREKA! meeting.

I further agree to not record any audio or video portion of the program in any way.

Name (PLEASE PRINT)

Signature

Date

Street Address

City, State, Zip Code

If participant is under the age of 18, the participant's parent or legal guardian must also sign:

I, (printed name) _____, am the parent or legal guardian of the participant who has signed above. I have read and I understand the provisions of this document and I do hereby agree my minor child will participate in the program as detailed above and on the 2022 In-Person EUREKA! program itinerary along with any other activities required by the program. I also acknowledge that if my minor child does not participate, my minor child will not be refunded any program fees or receive any TigerStripe funds.

Signature of Parent or Legal Guardian

Date