Introduce a Girl to Engineering Day 2025 Registration

Please postmark by February 17th and mail to: Asli Ali, 5 Chapin Way, Jandon Center, Wright Hall, Northampton MA, 01063 -- or scan and email to aaali@smith.edu.

Introduce a Girl to Engineering Day (IGTED) is a free annual event to offer a glimpse into STEM fields and demonstrate how pursuing an education or career in STEM is possible and fun! Our theme this year is Sustainable Future, where all workshops emphasize innovation. This is a **free** one-day event where **middle-school-aged girls and gender non-conforming students** will have the opportunity to sign up for a morning or afternoon hands-on workshop in a college environment.

This year the event will be held on **Saturday, March 8th from 9:00 AM-5:00 PM** in Ford Hall at Smith College. There are six workshops to choose from. Your child can either attend the morning or afternoon session, not both. The morning session runs from 9:00 AM - Noon and the afternoon session is from 2:00 - 5:00 PM.

A schedule of the day can be found here. There are 60 spots and it is first come first serve! **If a parent/guardian plans to sign up multiple students, please fill out a new form for each one.**

Please note transportation is not provided. However, free visitor parking will be available at the Smith College Parking Garage (42 West St, Northampton, MA 01063).

Event Details: Saturday, March 8th, 2024
Morning Session: 9:00 AM - Noon
Afternoon Session: 2:00 - 5:00 PM
Event Address: Ford Hall, 100 Green Street, Northampton, MA. 01063
Contact: swe@smith.edu

1. Guardian's First and Last Name: _____

Please write your legal name as we will be checking IDs.

2. Guardian's Email: _____

Please list an email that you check regularly. We will send event details, reminders, and updates to this email.

3. Cell Phone Number: _____

We will only contact this number in the case of an emergency.

4. Child's First and Last Name: _____
5. Child's Preferred Name (if different from above):_____
6. Child's School & Grade: _____
7. Please list any health/medical concerns we should know about your child. Write N/A if none:
   _____
   _____
8. Is there anything else we should know about your child?
   _____
   _____

9. Does your child want to attend the morning or afternoon session? Please do **not** circle both sessions so we can provide spaces for as many people as possible.

Morning Session (9 AM - Noon)
Afternoon Session (2 - 5 PM)

10. Please rank which workshops your child prefers. Mark only one circle per row. (1 = first choice, 5 = last choice) ***Biomedical engineering is only available in the morning session***

	1	2	3	4	5
Environmental Engineering	○	○	○	○	○
Renewable Energy	○	○	○	○	○
Electrical Engineering	○	○	○	○	○
Computer Science	○	○	○	○	○
Biomedical Engineering	○	○	○	○	○

Participants are reminded that we expect them to:

- Follow all safety guidelines identified by the teaching team
- Wear all required safety equipment (safety glasses, gloves, etc.)
- Report any and all allergies, injuries and exposures to the teaching team

Note: If your child brings a phone, be aware that cell service is not reliable in Ford Hall where the event will take place.

SMITH COLLEGE
Release of Liability / Assumption of Risk / Agreement Not to Sue

Read this Release, Assumption of Risk, and Agreement not to Sue (this "Release") carefully and in its entirety. It is a binding legal document. After reading this Release, sign your name, to show that you agree to and do assume all risks associated with your child's participation in this Program and that you release SMITH COLLEGE, its employees, trustees, officers, students, volunteers, and representatives (the "College") of any and all liability resulting from your child's participation in this Program.

I, as the parent/guardian of the child named below, permit my child to participate in the **Introduce a Girl to Engineering Day program** described on the next page. I understand what the Program activities will be and give full approval for my child's participation in the Program. I also understand that some of the Program activities may include travel and give permission for my child to ride in College-owned or other vehicles as necessary.

I acknowledge that my child may be exposed to hazards and I voluntarily agree to assume all risks. I understand that the risks of the Program may include loss, injury, death, or property damage caused by accident or illness, the forces of nature, and travel by automobile, bus, or other vehicle or other hazards that are unknown.

In consideration of my child's participation in the Program, I hereby, now, and forever release the College from and against any causes of action, claims, or demands of any nature that may result from or be connected in any way to my child's participation in the Program ("Claims"). I further agree not to sue and agree to indemnify and hold harmless the College from any Claims. It is also my express intent that this Release shall bind my spouse, family members, heirs, guardians, legal representatives, and assigns.

I expressly agree that this Release shall be governed by and interpreted in accordance with the laws of the Commonwealth of Massachusetts. I intend this to be a complete and unconditional release of all liability to the greatest extent allowed by law.

My child has been told the rules of the Program and agrees to follow them. We understand that he or she (my child) may be asked to leave the Program if the rules or the instructions are disobeyed.

PROGRAM ACTIVITIES
The hands-on workshops may pose some risks because they may involve tools such as hot glue guns, matte knives, small hobby saws, scissors, soldering, or wire cutters. Participants will receive a safety talk before their workshop. When appropriate, we will provide safety glasses, gloves, or a supervised workstation.

By signing below, I hereby confirm that I am the Parent or Legal Guardian of the Participant enrolled in the Program and that I have read this document in its entirety, understand it, and sign it voluntarily.

Print Parent/Guardian Name:_____ Signature:_____

Print Student Name: _____ Date: _____

Email: _____ Telephone Number: _____

SMITH COLLEGE

Jandon Center for Community Engagement
Wright Hall
Smith College
Northampton, Massachusetts 01063
T: 413-585-3543 F: 413-585-3068

Video/Audio Release

I, _____, as
(print parent/guardian name)

_____'s parent or guardian, hereby grant **Smith**
(print student name)

College permission to make still pictures, videotapes, and sound recordings, separately or in combination, of my

child, _____; I also give **Smith College** permission to use the finished
(print student name)

videotapes, still pictures, and/or sound recordings for educational, instructional or promotional purposes only.

Further, I relinquish and give to **Smith College** all rights, title, and interest I may have in the finished videotapes, still pictures, and/or sound recordings, negatives, prints, reproductions, and copies of the originals, negatives, recordings, duplicates, and prints for educational, instructional or promotional purposes only.

_____
Parent/Guardian Signature

_____
Date