

# International Mathematical Summer School for Students



JACOBS  
UNIVERSITY

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## Participant (henceforth called "the participant")

First Name \_\_\_\_\_ Family Name \_\_\_\_\_  
Address \_\_\_\_\_  
Date of Birth \_\_\_\_\_

## Emergency Contact (close family friend or relative; for minors, enter a legal guardian)

First Name \_\_\_\_\_ Family Name \_\_\_\_\_  
Address \_\_\_\_\_  
E-mail Address \_\_\_\_\_  
Telephone (land line and mobile) \_\_\_\_\_

The participant is insured at the following health insurance (foreign health insurance card):

\_\_\_\_\_  
(Name of health insurance; insurance ID)

Does personal liability insurance exist?

Yes; company \_\_\_\_\_  No

## Personal Contribution

The personal contribution towards the costs of the summer school is €400 – or, if otherwise agreed, €\_\_\_\_\_.  
The participant declares that the aforementioned fee has already been paid to Jacobs University.

## German Law and place of Performance and of Jurisdiction

This Summer School Agreement shall be governed by the laws of the Federal Republic of Germany. Place of performance and exclusive place of jurisdiction for all disputes arising out of or in connection with this Summer School Agreement shall be Bremen, Germany.

## Participant

I hereby agree that I take part in the International Mathematical Summer School for Students, Germany, Jacobs University Bremen gGmbH, Campus Ring 1, 28759 Bremen, and that I accept this Summer School Agreement, the rules, regulations, and guidelines as described in this declaration, and the Summer School Housing Agreement.

\_\_\_\_\_  
(Signature)

## Parental Consent (if Minor)

We/I hereby declare that I am/we are the aforementioned parents/legal guardian of the participant, and I/we agree that he/she takes part in the International Mathematical Summer School for Students, Germany, Jacobs University Bremen gGmbH, Campus Ring 1, 28759, Bremen, and that I/we accept this Summer School Agreement, the rules, regulations, and guidelines as described in this declaration and the Summer School Housing Agreement.

\_\_\_\_\_  
(Signature)



2-12 JULY 2011  
INTERNATIONAL MATHEMATICAL  
SUMMER SCHOOL for Students  
in Bremen, Germany

## **Rules, Regulations, and Guidelines of the International Mathematical Summer School for Students**

1. The International Mathematical Summer School for Students (henceforth called “the School”) will be organized by Jacobs University Bremen gGmbH, Bremen. It takes place from July 2, 2011 to July 12, 2011, on the campus of Jacobs University Bremen gGmbH.
2. Any time the participant is away from Jacobs University campus and all travel before arrival and after departure from the School takes place at the participant's own risk. Participants arriving before the beginning of the school, or departing after its end, do so at their own risk, responsibility, and expense (for excursions see No. 5).
3. On campus, the Jacobs University College Rules are valid,
4. Every effort will be made to carry out the program as advertised. Jacobs University shall not be liable for any delay, change, or cancellation of the program, if such an event is caused by conditions beyond its control including, but not limited to, Force Majeure, Acts of God, natural disasters, and/or any other cause beyond the reasonable control of the party whose performance is affected. Should the regular program be interrupted, or a particular advertised lecturer be prevented from coming, Jacobs University is entitled to and will make every reasonable effort to find adequate replacement.
5. The program includes an excursion to the seashore and other excursions, for instance to downtown Bremen. On such excursions, there will be some free time for participants. During these times, participants are unsupervised and free to explore the place without being accompanied by a supervisor. All participants must report attendance and absence to the supervisor.
6. ***Special Clause for Minors: Excursions***  
*With their signature, the parents or legal guardians give their consent for the participating minor to carry out activities on their own, without a supervisor. When not accompanied by a supervisor, minors must move in groups of three. The supervisor is relieved of any supervisory obligations for the duration of the participant's absence from the group*
7. ***Special Clause for Minors: Stay on Campus***  
*Underage students (in Germany defined as students under the age of 18) naturally are not under supervision at all times within the university system or in university accommodation. It is possible for students to leave the campus at any time; supervision does not take place off campus. As the parents or legal guardians, we declare that the possible increase in personal responsibility and self-discipline required will not be over-challenging for our child. The Jacobs University Bremen gGmbH, its employees and other authorized persons are in this respect relieved from their supervisory obligation. Parents or legal guardians will take all necessary measures required to ensure that the student has an adequate understanding of the summer school, life on campus on their stay at the Jacobs University Bremen gGmbH, Germany, in order for them to avoid violation of their obligations and to avoid them being the cause of any damage or negligence. Parents or legal guardians are liable for their children. The Jacobs University Bremen gGmbH is exempt from liability for any violation against supervisory obligations, should they occur. Excluded from the aforementioned liability exemption are claims made for injury to life, limb, and/or health and for claims made against Jacobs University Bremen gGmbH for compensation for damages caused by intentional or grossly negligent breach of their supervisory obligations.*
8. All participants must follow the instructions of the supervisor in charge.
9. Jacobs University does not allow participants of the Summer School to consume alcohol or drugs.
10. Swimming is not permitted at any time.
11. For the duration of the Summer School, participants will receive a transponder key. In case of loss or damage, a replacement fee of EUR 50,- will be charged to the participant.
12. Participants are personally liable for all damages on campus incurred by them. If compensation cannot be claimed through an insurance company, participants and their parents and legal guardians are personally responsible for all occurring costs.
13. Jacobs University and the Summer School have permission to use or publicize photographs taken during the Summer School, on their homepage and for any other advertising purpose. They are not permitted to pass this material on to a third party unless stated otherwise by the participant.

14. Under certain circumstances (e.g., for transport to/from airport/train station, to visit a doctor) participants can travel at their own risk in a supervisor's vehicle, in the vehicle of another authorized supervising person, or in another private vehicle. Under such circumstances, the right to compensation for any damages (against driver and car owner) will be waived, if compensation cannot be claimed through an insurance company. If a third party is liable for damages, the claim for damages against them by the passenger will be limited according to the partial sum equivalent to the extent of the joint liability of that third party.
15. Conflict situations arising within the group or with supervisors will be dealt with during the Summer School. The participant must follow the instructions of the supervisor in charge. In case of repeated or serious violations, supervisors may decide to end the participation promptly.  
*In case the violator is a minor, parents or legal guardians will be informed, and further action will be discussed. Parents or legal guardians will leave their contact details including E-mail and telephone (if available) with Jacobs University Bremen gGmbH Mathematical Summer School, so they can be reached at any time, including in cases of emergency, and they will also immediately inform the university of any changes. The decision to end the participation is entirely at the discretion of the supervisors and the Jacobs University Bremen gGmbH.*  
**Jacobs University Bremen gGmbH is excluded from any liability for culpable behaviour of participants.** Parents and legal guardians give their permission for the Summer School to be ended for their child at their own expense either for serious violations of the rules or for pedagogical reasons.

## Health Issues

The attached questionnaire must be returned completed and signed. For medical emergencies, the Math Summer School should be informed of any health restrictions or illnesses which require special treatment, demand special care or attention, or which could cause a risk for the other students (e.g., risk of infection).

- **According to the Infection Protection Act (Infektionsschutzgesetz) of the German Federal Republic participants are obliged to inform the School in writing if they have, or are suspected of having, an infectious disease.**
- If the participant regularly needs to take medicine or if he/she is dependent on any medicinal aids, the administration or use of these will be entirely the responsibility of the participant.
- Lifesaving medical operative interventions or vaccinations which are considered to be urgently required by a consulted doctor will be carried out in case of an emergency.
- Jacobs University takes special care to provide a variety of meal options for many dietary needs and preferences. No responsibility can be assumed that the food offered will suit the personal needs of individual participants. Any special dietary restrictions (e.g., allergies) are entirely the responsibility of the participant.

## Data Protection

The Jacobs University Bremen gGmbH will treat as confidential all data which has been confided as part of this declaration and in compliance with pertaining regulations, and that the evaluation, processing, and use of this data will only take place in compliance with current applicable German Law, for the purposes of executing this agreement and/or agreements between the Math Summer School and the participant.

With our/my signature we are/I am confirming that we/I accept the rules, regulations, and guidelines as described in this declaration, and that we/I have read and completed fully and accurately the attached questionnaire. All consequences with regard to the intentional withholding of relevant information will be entirely at our/my own expense.

I/We agree to the above, and assure that all information in the attached questionnaire is true and complete.

**Participant** \_\_\_\_\_  
 Date/signature of participant

**If Minor** \_\_\_\_\_  
 Date/signature of parents or legal guardian

**Special Details on Participants**

**Questionnaire for Medical Emergencies**

In case of emergencies, this questionnaire will be handed to the consulting doctor to help carry out lifesaving medical operations. All information will be treated as confidential.

**Participant**

First Name \_\_\_\_\_ Family Name \_\_\_\_\_.

**Emergency Contact** (*close family friend or relative; for minors, enter a legal guardian*)

First Name \_\_\_\_\_ Family Name \_\_\_\_\_.

Telephone (land line and mobile) \_\_\_\_\_.

[ ] The participant does not have any special health issues.

[ ] The participant does have special health issues, declared below.

Asthma \_\_\_\_\_

Epilepsy \_\_\_\_\_

Psychological illnesses/Special health issues \_\_\_\_\_

Infectious diseases \_\_\_\_\_

Allergies (iodine/penicillin/other) \_\_\_\_\_

Other limiting or particular health issues \_\_\_\_\_

Medicine to be taken regularly \_\_\_\_\_

Dose of the medicine \_\_\_\_\_

Special rules of conduct \_\_\_\_\_

Miscellaneous medical information \_\_\_\_\_

Special Dietary Needs

No [ ]

Yes [ ], please specify

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Participant** \_\_\_\_\_

date/name/signature of participant

**If Minor** \_\_\_\_\_

date/name/signature of legal guardian