The Swarthmore Catalyst Conference is a conference designed to foster an appreciation for science, math and engineering in 7th and 8th grade girls. We invite girls from local middle schools to perform science experiments in hands-on workshops led by female professors, students, and local professionals. Participants will also take part in a discussion about women in science, led by female Swarthmore College students. Parents and teachers of participating students are also invited to our adult conference, which includes a workshop, a discussion, a student-hosted panel discussion on college and higher education, and a poster session featuring the research of Swarthmore students.

**When: Saturday, March 28th, 2015**
Registration begins at 8:00 AM and ends at 8:30 AM. The conference ends at 3:30 PM. A more detailed schedule of events will be emailed after the registration packet has been submitted.

**Where:** Swarthmore College  
Science Center  
500 College Ave, Swarthmore PA 19081

**Cost:** The participation fee is $20, payable by cash or check with no additional fee for the parent’s conference. **However, scholarships are available** thanks to the Swarthmore Foundation. We do not want the cost of participation to prevent students from attending the conference, so if financial assistance is required, please indicate that in the box at the bottom of the application form.

**Eligibility:** Any 7th and 8th grade girl is invited to apply.

**How to apply:** Please fill out the attached registration and release forms, and mail them in along with the participation fee. Your/your student’s application will not be processed until we have received all signed forms and the fee.

**Mail to:**  
Catalyst Conference  
c/o Sung Won Ma ‘16  
500 College Avenue  
Swarthmore, PA 19081

**Questions? Contact** swarthmore.catalyst@gmail.com
Student Information: (Please note the conference is open to 7th and 8th grade girls only)

Name: _____________________ Email: _______________ Phone: _______________
Street Address: _____________________ City: _______________ Zip code: _______
School: _______________________________ City: _______________ Grade: _______
Adult T-shirt size (circle one): S M L XL
Do you have any dietary restrictions, allergies, medical conditions or special needs we should know about?
__________________________________________________________

Parent/ Guardian Information:

Name: _____________________ Email: _______________ Phone: _______________

Will you attend the parent conference? Yes No

Circle the top three fields you would like to have a workshop in:
Biology Physics Engineering Astronomy
Chemistry Math/Statistics Computer Science Geology
Write a brief response to **ONE** of the following questions:
Why is math/science important? Why do you enjoy math/science? What do you find difficult about math/science? What do you want to learn about math/science?

______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

Please attach your $20 fee in cash or check (payable to Swarthmore College)

The Swarthmore Foundation offers a scholarship to participants who would not be able to attend the Catalyst Conference otherwise. Please make this request by checking here:

And initialing here: ____________
Swarthmore College - Assumption of Risk / Release of Liability

For Persons Under Age 18

Name of Person Giving Release:

_______________________________________________________________

Party Released: Swarthmore College, its agents and employees including board of managers, directors and officers, administration, faculty and staff.

Release: I release and give up all claims, including claims for negligence, I now have or may have in the future against the Party Released arising out of my participation in the following activity: CATALYST CONFERENCE to take place on March 28th 2015. I also understand that the activity set forth above is undertaken by me on a completely volunteer basis. I make this decision by choice and my participation in this activity is undertaken knowing that risk may be involved. These risks include, but are not limited to, property loss or damage and physical or emotional injury, temporary or permanent, and death. In addition to the above, event specific risks include, but are not limited to, use of laboratory equipment under supervision. I voluntarily assume the risk of these dangers by choosing to participate in the activity. I understand that Swarthmore College does not assume any risk or liability due to my participation in this activity. I understand this Release applies to all claims for property loss, injury or illness, or death or any other damages suffered by me, now or in the future, whether suffered in transport to the activity or during the activity itself.

Binding: This Release binds me, my heirs and personal representatives. I understand that it benefits the heirs, personal representatives or successors and assigns of the Party Released.

Parental or Guardian’s Acknowledgement of Assumption of Risk/Release of Liability for Minors:
I certify that the named child’s date of birth is __________ (month/day/year) and is _____ years of age. I further certify that I am the parent or legal guardian of the named child and that I am of lawful age (18 years or older) and otherwise legally competent to sign this agreement. I certify that I, together with the named child, have carefully read and both fully understand this Assumption of Risk/Release of Liability Form, and agree to its terms in all respects. I understand that the terms of this agreement are legally binding.

__________________________________ ________________________________ __________
Signature of Minor Minor’s Name, Printed Clearly Date

__________________________________     ________________________________  _________
Signature of Parent/Guardian Parent/Guardian’s Name Date

__________________________________     ________________________________ __________
Signature of Witness            Witness’s Name, Printed Clearly         Date

PLEASE PROVIDE HEALTH INSURANCE INFORMATION

Addendum I certify that I/my child is covered by an independent health insurance policy
Policy # Carrier

Page 4 of 6
Consent Form for Use of Photographs/Video
(for use by parent/guardian of person under 18 years of age)

I hereby give The Lang Center for Civic and Social Responsibility and Swarthmore College permission to use photographs or video of my child

__________________________________ ____________________
signature date

__________________________________ _____________________
please print name relationship to minor child

I understand that The Lang Center for Civic and Social Responsibility and Swarthmore College are non-profit educational organizations, and that these photographs will not be used for any commercial purpose. The Lang Center for Civic and Social Responsibility and Swarthmore College will not publish the identity of any minor(s) pictured in the photographs provided.
Permission to release girl to an adult who is not the girl’s parent or guardian

I, __________________________, the parent/guardian of ____________________________,
(parent/guardian name) (girl name)

grant permission to __________________________ to pick up __________________________
(adult name) (girl name)

from the Swarthmore Catalyst conference on Saturday, March 28th, 2015.

Signature of parent/guardian: ____________________________ Date: ________________