Introduction

Angelo State University hosts many events throughout the year which are designed to promote the university and/or recruit potential students, the most significant being summer camps. This handbook has been developed to help standardize Angelo State’s summer camps administrative procedures, ensure the safety/security of camp participants, mitigate liability, and define the roles and responsibilities of camp staff and volunteers. These factors are instrumental to achieving the summer camps’ mission.

Camp Mission

The mission of the Angelo State summer camps program is to provide well-organized and managed camps which provide a safe environment focused on developing the skills and fundamentals of the camp theme with an emphasis on promoting the university’s mission.

To accomplish this mission, each staff member and volunteer must work together within the camp community to achieve a balance that both protects and challenges each camper. Camp participants come from a variety of different backgrounds and come with a diverse set of expectations and needs. In order to serve each camper most effectively, it is necessary to establish clear objectives that set a course for leaders within the camp system.

Camp Objectives

Safety and security are critical to a successful camp and staff members and volunteers must work together to promote a safe and organized camp. Staff members and volunteers will provide the necessary boundaries in which campers can feel safe, successfully achieve growth, and enjoy their camp experience.

As a staff member or volunteer, you are accepting the responsibility of serving as a mentor and role model for youth who are part of a camp experience. The expectations set forth in this handbook govern the camp community and all those who serve within it. This handbook is intended to enhance the camp experience for participants and make it easier for camp staff members and volunteers to execute their responsibilities.

All staff members and volunteers should receive a copy of this handbook and be familiar with its contents. You are encouraged to bring it with you to the camp. The Camp Director will develop tailored policies and procedures for his/her specific camp and you should not hesitate to ask for clarification.
Application Process

The normal process includes:

I. Submission of a completed Camp Application Form (Attachment 1) and the Camp and Conference Reservation Form.

II. The Office of Special Events will coordinate with University departments and respond with available facilities and space. The reservation is not complete until the Office of Special Events receives a signed contract, including proof of insurance and deposit, not less than 10 business days prior to the scheduled beginning of the camp.

III. Camps are subject to cancellation if all outstanding items are not received and found to be complete and acceptable at least 10 business days prior to the scheduled beginning of the camp.

Significant Changes in this Edition

I. The Texas Tech University System has established a Camp and Conference Insurance Program to ensure the availability of cost effective accident and liability coverage (some higher risk activities are excluded). This program must be used for all University Camps unless a specific exemption is received from the Director of Risk and Emergency Management and may be used by third party camps whether or not affiliated with ASU. The insurance limits requirement for Sexual Abuse and Molestation Coverage has been increased to $1,000,000 per occurrence.

II. Provided link to Quick Tips On How to Respond To An Active Shooting Incident video.
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**Camp Forms**  
(ASU Affiliated Camps includes University Camps and Third Party Camps sponsored by ASU employees)  
Attachment 1  Camp Application Form (All Camps)  
Attachment 1a Athletic Camp Application Form (Alternate form for Athletic Camps)  
Attachment 2  Camp Participant Release Agreement (All Camps, example only)  
Attachment 3  Camp Medical Information Form (ASU Affiliated Camps)  
Attachment 4  Photography, Video, and Sound Recording Release (ASU Affiliated Camps)  
Attachment 5  Camper Accident/Incident Report (All Camps)  
Attachment 6  Camp Insurance Requirements (All Camps)
I. General

One of the keys to ensuring the success of the ASU summer camps program is to provide a clear understanding of the requirements and expectations to conduct a camp.

A. Camp Types

1. University Camps utilize the university’s name, staff, affiliation or, other resources and are sponsored or operated under the administrative purview of a university college, department, or recognized organization. All funds are administered through ASU.

2. Third Party Camps are usually sponsored by a non-university affiliated entity. University employees may operate camps independent of university funding/sponsorship in which case they are considered a Third Party Camp. All Third Party Camps are subject to ASU policies/procedures regarding camp approval.

3. Day Camps constitute activities that are accomplished during a part of or the entire day after which a parent/guardian is responsible for picking the participant up and there is no overnight stay in campus facilities or off campus under the supervision of camp staff/volunteers.

4. Overnight Camps involve activities in which the participants stay overnight in campus facilities or off campus under the supervision of camp staff/volunteers.

B. Camp Approval

1. University Camps:
   a. All University Camps should promote the mission and goals of the university and will operate under the administrative sponsorship of a university college, department, or recognized organization.
   b. All University Camps must be approved before activities occur. University Camp sponsors shall apply for approval on an annual basis using the Camp Application Form (Attachment 1). An alternate Athletic Camp/Clinic Application form has also been approved (Attachment 1a, available from Athletics).
      (1) University Camps sponsored by an academic college will be approved by the appropriate Dean.
      (2) University Camps sponsored by a unit within Academic Affairs will be approved by the Provost/Vice President for Academic Affairs.
      (3) University Camps sponsored by a unit within Student Affairs will be approved by the Vice President for Student Affairs and Enrollment Management.
      (4) The Director of Athletics will approve University Camps sponsored by the Athletics Department.
   c. Special Events will receive and consolidate all billing into a single payment which will be due no later than 30 days after the camp concludes. All invoices associated with the camp, such as facilities use, food services, housing, etc., will be paid from the account on file.
d. University camps shall use the Texas Tech University Camp and Conference Insurance Program for camps and activities that are not excluded and where they meet underwriting guidelines.

2. Third Party Camps

a. Third Party Camp sponsors shall apply for approval on an annual basis using the Camp Application Form (Attachment 1). Third party athletic camps and clinics sponsored by ASU employees may use the alternate Athletic Camp/Clinic Application form (Attachment 1a).

b. The camp sponsor should use the Summer Camps and Conferences Rate Sheet to estimate costs that will be incurred to host the camp.

c. Third Party Camps must coordinate payment with the Office of Special Events and will receive a consolidated bill which will be due no later than 30 days after the camp.

d. Each Third Party camp must maintain adequate insurance. All camps shall conduct background checks and satisfy the State Youth Protection Training requirements.

e. Insurance Requirements

(1) As a condition of approval, all Third Party Camps are required to obtain insurance coverage with limits not less than those described in Attachment 6. The cost of the insurance policy will be the responsibility of the camp sponsor.

(2) All Third Party Camp sponsors are required to provide a certificate of insurance demonstrating required coverage and limits. The certificate will be filed with the Office of Special Events at least 10 business days prior to the camp start date. Failure to do so may nullify the agreement and all commitments made by ASU.

(3) Third party camps may use the Texas Tech University System Camp and Conference Insurance Program for camps and activities that are not excluded and where they meet underwriting guidelines.

3. All Camps (University Camps and Third Party Camps)

a. University Clinic only provides services to students currently enrolled at the university who have paid their medical services fee. Athletic Trainers are not legally recognized as medical providers nor are they insured to provide medical treatment. All Camp Sponsors must provide a formal procedure for routine and emergency medical services as part of the application process. See section II. B for information and requirements regarding medical care.

b. Upon receiving approval, the camp sponsor will complete the Camp and Conference Reservation Form which is located on the Special Events Summer Camps and Conferences website. This is necessary to coordinate facilities, housing, food services, and other camp requirements.

c. The Camp Application Form (including internal approvals for University Camps) must be forwarded to the Office of Special Events when the Camp & Conference Reservation Request Form is submitted.

d. Once the approval process is completed, Special Events will schedule a planning meeting with the camp sponsor and involved parties to coordinate the camp requirements.
The planning meeting will typically occur within four (4) weeks of the camp start date and the following will be discussed as a minimum:

1. Camp schedule
2. Food Service – times, locations, and dates of meals
3. Housing – check-in/out procedures
4. Transportation and parking procedures
5. Coordination with campus departments (UREC, Admissions, etc.)
6. Required documents, including compliance with Texas Education Code 51.976, and billing
7. Any other questions or concerns

Changes to the agenda or items discussed in the meeting will need to be submitted in writing to the Special Events office no later than 10 days prior to the camp start date.

e. All campers must sign the Camp Participant Release Agreement and parents or legal guardians must also sign the Agreement if the camper is a minor. Third party camps may elect to use their own form in addition to the ASU form. Camp sponsors shall maintain the participant release agreements and shall provide an electronic copy (PDF) to the Environmental Health, Safety, and Risk Management Department. (Sponsors may make arrangements with the Office of Special Events to scan the forms, in which case the forms must be organized in a manner appropriate for batch scanning.) For university camps, departments with OnBase access should also upload their release forms.

C. Camp Staffing

1. All camps must have a Director who is responsible for supervising staff and volunteers, conducting the camp and overseeing all aspects of camp operations. An Assistant Director should also be designated to assist with managing the camp and staff members and volunteers.

2. Staff Members and Volunteers
   a. Summer camp staff members are paid positions which are filled by persons over the age of 18 and may include: directors, assistant directors, counselors, coaches, lifeguards, and administrators.
   b. University employees performing work with or for a camp as a part of their regular position or representing the university as a component of their regular position will follow the guidelines below.
      (1) Employees must coordinate with their supervisor prior to working but they are not required to use annual leave to help conduct university sponsored camps when they are representing the university.
      (2) Employees are not allowed to receive additional compensation (fees, honorarium, stipend, or other forms of payment) while representing the university.
b. University employees performing work with or for a camp that is NOT a part of their regular position or NOT representing the university as a component of their regular position, will follow the guidelines below.

(1) Employees are required to request vacation leave and comply with departmental rules and Operating Policy 52.49 regarding vacation leave in order to help conduct Third Party Camps when the employee is not representing the university or performing duties associated with the employee’s regular position with the university.

(2) University employees may only receive pay for working a camp during times in which the employee is not performing duties and receiving compensation for their regular job at the university.

(3) If employees are working for camps, either on campus or off campus, and this is not a part of the employee’s regular position and the employee is to receive pay for this work, this work is considered to be other employment and all provisions of Operating Policy 52.31 for staff and Operating Policy 06.17 for faculty should be followed. Workers’ compensation coverage is not available through the State Office of Risk Management during outside employment or volunteer activities.

c. Volunteers are not usually paid and may include university employees, students, or persons that are not affiliated with the university that volunteer to help facilitate camp activities.

3. Staff Member/Volunteer Screening and Training

   a. Camp Directors are encouraged to develop and administer a camp orientation and training program tailored to the unique aspects of their camp. University Camp Directors will submit their program to the sponsoring college, department, or organization for review and approval.

   b. University Camp Directors will ensure a sex offender registry check is conducted annually for all staff members and volunteers who will work directly with campers under the age of 18. Any individual who is found to have been convicted of an assault, molestation, indecency with a minor, athlete abuse, etc. will not be allowed to participate in any camp activities.

   It is recommended that you use the free National Sex Offender Public Website at http://www.nsopw.gov/en to accomplish these checks. Type in the First and Last name in the Quick Search window (upper right side) and click on the “Search” tab to begin the process. Next, check the terms of NSOPW box, enter the provided code in the designated window, and click on the “Continue” tab to obtain the search results.

   It is also highly recommended for Third Party Camp Directors to conduct annual sex offender registry checks for all of their staff and volunteers who work directly with minors, especially for Overnight Camps.

   c. All University and Third Party Camp staff members/volunteers who will work with participants that are minors (under the age of 18) are required to complete the State approved Youth Protection Training. This training is required to be completed every two years and each staff member/volunteer must provide a current certificate of completion to the Camp Director prior to working with minors. The Camp Director is responsible for ensuring that all personnel have received training in sexual abuse and child molestation prevention pursuant to Texas Education Code, 51.976, prior to any camp in which minors will participate. The Camp Director must also maintain on file and present upon request, documentation that verifies all staff have successfully completed a State of Texas
approved training and examination program on sexual abuse and child molestation within the preceding two years.

(1) Training of university employees and students is facilitated by the Office of Human Resources and paid for by the university. Current employees and enrolled students (with a valid CID) will be granted access to complete the training. The camp sponsor should provide a roster of eligible staff members/volunteers to the Office of Human Resources to coordinate training or obtain proof of training compliance.

(2) Camp staff members/volunteers that do not have a university affiliation are required to complete a State approved Youth Protection Training course at their expense. Documentation of the training must be provided to the Camp Director prior to working with minors. A list of “Approved Training and Examination Programs” may be found on the Texas Department of State Health Services website at http://www.dshs.state.tx.us/youthcamp/forms.shtm#trainexam.

3. Staff Member/Volunteer Decorum
   a. All staff members/volunteers are expected to conduct themselves in a manner consistent with the ASU summer camps mission and objectives.
   b. Any staff member/volunteer who fails to adhere to the Summer Camps Handbook guidelines and procedures will be subject to dismissal by the Camp Director.
   c. Any staff member/volunteer whose behavior is deemed inappropriate with campers, other staff members/volunteers, or camp staff will be asked to leave immediately.

D. Camp Rules
1. Camp Directors are responsible for developing and disseminating rules/procedures to staff members, volunteers, and campers. In addition to processes and procedural guidance, the following items should be addressed as a minimum.
   a. Use or possession of illegal drugs, alcohol, or tobacco (including vaping) is prohibited.
   b. Hazing, bullying, or any form of physical or verbal abuse is prohibited.
   c. Use of cameras, imaging, or digital devices in areas where privacy is expected, including but not limited to showers and restrooms, is prohibited.
2. Any participant who violates a prohibited activity should be immediately dismissed from the camp. University Police must also be notified of all activities of a criminal nature.
3. Pursuant to Texas Penal Code 30.06 and Angelo State University Operating Procedure 02.10, a licensed holder with a concealed weapon is prohibited from entering any premise in which a program, activity, or camp is being conducted for minors. Additional areas where concealed weapons are prohibited are posted. Texas Penal Code 30.07 prohibits the open carry of a handgun on all university property.
4. There are numerous planning considerations when developing camp rules which will depend on the nature of the camp. These include, but are not limited to: facility use, transportation, communications, safety and security, emergencies, medical treatment, meals, lodging, hygiene, and curfew, etc., some of which are addressed in this handbook.

E. Camp Marketing
1. All University Camp publications and web sites will be reviewed by Communications and
Marketing to ensure compliance with university templates, formatting, and branding.

2. Athletics Camp Directors will submit all draft text to the sports information director, compliance director, and athletics director for review, editing, NCAA compliance, risk assessment, formatting, and branding.

3. A *Photography, Video, and Sound Recording Release* (Attachment 4) must be obtained prior to using any camper’s image or recorded voice in a camp publication or website.

**F. Camp Registration**

1. The Camp Director should develop the registration process which should include the following information as a minimum:
   a. Camp information to include location and dates and times.
   b. Camp Rules.
   c. What to bring to the camp.
   d. Registration information to include all necessary forms and releases. A *Camp Participant Release Agreement* (Attachment 2) and *Camp Medical Information Form* (Attachment 3) must be submitted for all camp participants; staff members, volunteers, and campers. A *Photography, Video, and Sound Recording Release* (Attachment 4) will be required if you intend to use photographs, images or sound recordings of campers in print or media productions.

**G. Supervision and Responsibility**

1. The Camp Director is the ultimate authority and decision-maker in all aspects of each camp. All summer camp staff members and volunteers are responsible to the Camp Director and should direct any questions regarding camp procedures to the director.

2. Staff members and volunteers are responsible for the enforcement of camp guidelines and procedures as they supervise campers.

3. A staff member must be present at all times to supervise campers regardless of activity.
   a. *One staff member per 10 campers must be present for campers under 12 years old.*
   b. *One staff member per 15 campers must be present for campers ages 12-17.*
   c. Camp Directors should consider assigning additional staff members/volunteers to monitor campers during physical activities and overnight stays.

4. From time to time, campers will leave the campus for recreational opportunities approved by the Camp Director. Camp Directors are expected to supervise their groups at all times while away from campus. Only approved drivers are allowed to transport campers. University Camp drivers must be on ASU’s approved driver list.

5. Each camp operates as a closed campus during sessions. Staff members/volunteers must ensure the safety and security of campers by honoring this status.
   a. No visitors permitted without the permission of the Camp Director.
   b. The Camp Director must approve all requests for campers to leave the campus.
c. Any strangers "hanging around" or attempting to mix with camper groups will be reported immediately to the Camp Director.

H. Use of University Facilities

Approval to conduct a camp does not guarantee facility availability or usage. It is the responsibility of the camp sponsor to coordinate the reservation of campus facilities/property with the Office of Special Events for the desired dates.

1. Guidelines for use of Campus Property
   a. At no time may a group change their assigned location (facility or outside area) without prior approval of the Camp Director who must coordinate all changes with the Office of Special Events.
   b. Use the assigned location for all activities to ensure campers can be found during emergencies or to receive messages.
   c. Monitor campers' behavior at all times and remind them that classes and/or work are in progress on campus during the summer.
   d. Keep noise levels to a minimum and be respectful of the workplace while inside campus facilities to ensure employees are able to complete their tasks without being disturbed.
   e. Honor the requests of the facility/university in terms of food and drink. Many locations have posted notices. When in doubt, do not allow campers to bring drinks or food into the area.
   f. Have campers clean up after themselves prior to leaving the facility each day. Campers should take all personal items with them upon leaving.
   g. Always keep campers away from any special equipment or other hazards that may be located in facilities or outdoors.
   h. Any damage to university property, facilities, furnishings, or equipment will be charged to the responsible party (staff members/volunteers or campers). If a camper is involved, the parent/guardian will be contacted, and a letter will be sent describing the nature of the charges and the amount due.

2. Guidelines for use of Residence Halls
   a. Residence Hall policies/procedures will be explained and a camper’s failure to comply may result in being dismissed from the residence hall.
   b. Campers will only use the room assigned . . . no switching rooms.
   c. Campers should lock their door every time they leave their room. *Angelo State is not responsible for loss or damage to any personal property or belongings.*
   d. Campers should contact staff members who will in turn contact the residence hall staff for any specific needs or problems with their assigned room.
   e. Furniture will not be moved from one room to another and the room must be maintained in the same condition in which it was found.
f. Campers of opposite gender shall not (at any time) be allowed in each other’s rooms unless a staff member is present.

g. Campers are responsible for their room key/swipe card and will be charged a fee to re-key a lock and for a new key/swipe card.

h. Any damage to rooms or furnishings caused by occupants must be paid for by the person(s) responsible for the damages. If a camper damages property, his/her parents will be charged. Parents will be contacted, and a letter will be sent describing the nature of the charges and the amount due.

I. Transportation and Parking

*University Camp Directors will ensure campers are transported in university-owned or leased vehicles and by university approved drivers in accordance with Operating Policy 36.03, University Vehicles. Campers should only be transported for a scheduled camp activity.*

1. University Driver Requirements (See Operating Policy 36.03, University Vehicles, for full requirements).

   a. Must be a university employee and at least 18 years of age.

   b. Must have a minimum of two years driving experience, submit a driver approval request form, copy of driver's license, and pass an MVR check.

   c. Must be 20 years of age and complete the van safety training course to operate university owned or leased 12 passenger vans.

   d. Must have a Texas CDL to operate a vehicle that holds 16 or more passengers.

2. University Transportation Requirements

   a. Do not load vehicles beyond designed capacity.

   b. All vehicle occupants must wear available seat belts.

   c. All vehicles used to transport campers should be equipped with a first aid kit.

   d. Staff members/volunteers will NOT use a cell phone while operating a vehicle.

   e. When feasible, a second staff member/volunteer should ride in the vehicle.

   f. Drivers should obey all traffic laws. *ASU does not assume any responsibility for tickets or accidents caused by a driver’s failure to obey traffic laws.*

   Refer to Operating Policy 36.03 for additional information regarding vehicle operator conduct and responsibilities and the requirements and restrictions associated with operating passenger vans.

3. Third Party camps may operate vehicles (not golf carts, Gators, etc.) on university property if they meet insurance requirements.

4. Parking Requirements

   a. All non-university affiliated camp staff, volunteers, or attendees needing to utilize on-campus parking, must obtain prior approval from Parking Services. University Camp sponsors will also need parking permits for rented/leased vehicles.
b. University Camp sponsors are responsible for coordinating parking permits and should follow the steps below to submit a parking request.

- Visit the [ASU Parking Services](#) Homepage
- Hover over the Faculty & Staff tab (bottom left)
- Select the Faculty/Staff Visitor Parking Permit Request
- Complete and submit the form

c. Camp sponsors will coordinate parking lot assignments for vans, buses, and trailers with Special Events during the planning meeting.

II. Camper Care

A. Safety/Security

1. Camper Accountability
   a. Campers are to remain in their assigned area or with their staff member/volunteer at all times.
   b. Campers are not permitted to wander the campus.
   c. Campers must have the Camp Director’s permission to leave the campus.
   d. No camper will be allowed to leave the campus during a camp session (for a non-camp-sponsored activity) without the written permission of (or accompanied by) their parent or legal guardian. All campers who leave for any reason must check out with the Camp Director or a designated representative prior to leaving.
   e. Campers who leave with permission must be picked up by a parent or legal guardian, in the presence of a staff member.
   f. Staff members are responsible for verifying the presence of their campers at all camp-led activities, including breakfast and final arrival at the residence hall at night.

2. Lost Campers
   a. Any camper found wandering the campus should be brought immediately to the activity in progress.
   b. Any camper discovered missing should be immediately reported to the Camp Director and a search begun until the camper is located.

3. Lost or Damaged Items

   *Angelo State University is not responsible for personal property or other items belonging to staff members, volunteers, or campers which are lost or damaged.*

   a. Staff members/volunteers and campers must reimburse the university for lost keys and swipe access cards, to include re-keying charges.
b. Unaccounted for property is typically turned into the University Police Department but Camp Directors should check with the facility manager to determine lost and found procedures.

c. Items found during camp should be turned in to the Camp Director or designated representative until claimed by the owner.

4. Visitation Policy

a. The Camp Director must approve all visitors during camp activities.

b. The Camp Director and Housing staff will be immediately notified if any unauthorized visitor is found in a residence hall.

5. Youth Protection Requirements

a. Child abuse in any form will not be tolerated. This includes improper touching/contact, abusive or suggestive language, or striking a child. Avoid compromising situations. Children can mistake well-meaning attention as sexual misconduct. Texas State Law requires that Child Abuse or Sexual Abuse, real or alleged, be reported to proper authorities for investigation. Anyone who suspects or discovers child abuse should report it immediately to the Camp Director.

The Camp Director and University Police will be immediately notified of any suspected abuse or neglect. Confirmed incidents can be reported to the Texas Department of Family and Protective Services Abuse Hotline, at (800) 252-5400 or through their secure web at https://www.txabusehotline.org/Login/Default.aspx.

b. Any Camp or Conference that includes minors must meet special requirements as outlined by Senate Bill 1414 (82nd Legislature). Although ASU does not require proof of each staff member’s compliance, we will require the Camp Director to acknowledge their responsibility to ensure their camp’s compliance with S.B. 1414, 82nd Leg. The Camp Director must certify that all personnel have received training in sexual abuse and child molestation prevention pursuant to Texas Education Code, 51.976, prior to any camp in which minors will participate. The Camp Director must also maintain on file and present upon request, documentation that verifies all staff have successfully completed a State of Texas approved training and examination program on sexual abuse and child molestation within the preceding two years. Our ASU staff will also be complying.

B. Medical Care

All campers must complete and submit a Camp Medical Information and Release Form (Attachment 3). The form must be completed by the parent or legal guardian if the camper is less than 18 years old.

1. Staff Medical Training

a. It is highly recommended that staff members be certified in basic first aid and CPR (as a minimum) to assist during minor emergencies. Staff members and volunteers should receive instructions for how to assess/treat campers’ minor injuries.

b. University Clinic practitioners provide medical treatment only for students that are currently enrolled at the university and have paid their medical services fee.
c. Athletic Trainers are required by law to work under the direction of a licensed physician when providing athletic training services, regardless of whether it is for a University or Third Party camp. They are not insured to provide athletic training services to students that are not enrolled at the university and should have personal liability insurance in this situation. Athletic Trainers may, however, be employed to provide first responder/first aid services for any camp.

2. Medication

a. Campers requiring daily prescription or over the counter (OTC) medications must turn in their medications, with complete instructions, during check-in. Prescription medications must be in the original pharmacy container with the child’s name and dosage on it and include a note from the parent/legal guardian if there are specific directions in addition to the labeled instructions.

b. Prescriptions and medications will be secured in a designated location in a room that can be locked and access restricted. The Camp Director should designate a Camp Medic, a staff member that is authorized to access/administer medications and provide treatment protocols. A record of when medication is dispensed will be maintained and the camp staff and campers are responsible for keeping track of medication schedules. In the event that an injection, breathing treatment, or other serious form of medication is necessary, the parent or legal guardian will be responsible for administration. **Campers may not self-medicate.**

c. Camp Directors will need to develop procedures for campers to have access to their personal EpiPen or inhaler (if applicable) for the duration of the camp.

3. Medical Treatment

*Any time a camper is injured or becomes ill and is under the age of 18 years old, the parent or legal guardian should be notified.*

a. First Aid Station

A First Aid Station should be designated and equipped with a phone, a standard first aid kit, and additional items for minor medical needs such as tweezers, Band-Aids, anti-biotic gels, hand sanitizer, latex or nitrile gloves, etc. This location can also serve as the medication dispensary if it meets the requirements in section 2.b above.

b. Minor Medical Needs

(1) Sick or injured camper (minor): This plan may be initiated by any staff member or volunteer and the Camp Director or Assistant must be notified.

   (a) Campers must be escorted by a counselor or other staff member to and from the First Aid Station to receive medical treatment.

   (b) During camp daytime operations, campers suffering from minor illness or non-serious injury may be escorted to the First Aid Station to receive treatment from the Camp Medic or other properly trained staff member.

(2) Sick or injured camper (serious): This plan may be initiated by any staff member or volunteer and the Camp Director or Assistant must be notified.

   (a) The camper may be sent to a Minor Emergency Clinic or Trauma Center for treatment and this will be coordinated with the Camp Director or Assistant.

   (b) The camper’s medical treatment release form must be taken for any required
treatment. The original will be on file in the camp office; a copy will be made available prior to the camper being transported for treatment. The record of when medication was dispensed (if applicable) should also be taken.

(c) At no time may a University Camp staff member or volunteer transport a camper for medical treatment.

(d) Call 911 to request Emergency Medical Services (EMS) for treatment and/or transport to a medical treatment facility (9-911 on university phones).

c. Severe Injury / Emergency Medical Needs

(1) In the event of a severe injury or medical emergency, immediately contact the Camp Director or Assistant.

(2) Call 911 to request EMS to treat/transport the injured to the nearest appropriate medical treatment facility (9-911 on university phones).

(3) If the decision is made by EMS to transport the camper, a staff member should accompany or follow the ambulance to assist as necessary.

Whether the injured camper is taken to a medical treatment facility or treated by the camp staff, the incident must be reported as soon as practicable.

d. Reporting

(1) A Camper Accident/Incident Report (Attachment 5) is to be completed by the staff member or volunteer who witnessed the accident and promptly reported to the Office of Environmental Health, Safety and Risk Management at ehsrm@angelo.edu.

(2) Injured University employees should submit an Employee Accident/Incident Report.

C. Emergency Procedures

1. Staff Member/Volunteer Emergency Preparedness

a. Ensure you are prepared to implement measures to ensure the safety and welfare of campers during an emergency.

b. Enroll in ASUAalert to receive email/text notification and maintain a cell phone at all times to receive emergency notifications. Persons who do not have RamPort access can arrange to have their contact information added through University Police.

c. Be familiar with the Emergency Action Plan (EAP) for each facility you are using, including the location of fire extinguishers, fire alarm pull stations, emergency egress pathways and exits, and designated shelter areas.

d. Coordinate notification and response procedures for lightning/severe weather during outdoor activities with the Special Events office.

2. Fire Procedures

a. Call 911 and report the specific location and nature of the fire (9-911 on university phones).

b. Attempt to extinguish the fire if minor, such as a small trash can fire.

c. If the fire cannot be safely extinguished, implement the facility Evacuation EAP.

d. If the facility is not in alarm, activate the system using the fire alarm pull station.
e. Alert all campers to evacuate using the nearest exit.

f. Once everyone is outside, verify the presence of each camper and staff member.

g. Call University Police via the nearest emergency call box once everyone is safely evacuated.

3. Severe Weather/Tornado Procedures

a. Implement the facility Shelter-in-Place EAP.

b. If outdoors, move to the nearest facility to seek shelter.

c. Account for all campers and secure them in a designated shelter area.

d. Remain in the shelter area until “All Clear” is received.

4. Active Shooter or Similar Threat Procedures

ASU Police will respond to all incidents that threaten the safety/security of the university. Staff members and volunteers are responsible for implementing action to ensure the safety of campers. Please view Quick Tips On How to Respond To An Active Shooting Incident video.

a. Immediately notify ASU Police and the Camp Director of any situation that poses a threat to yourself and/or the campers. Example: If you detect or are made aware of someone in the area/facility with a weapon.

b. Whether you receive reliable information from someone else or have first-hand knowledge of a significant threat, implement the Lockdown EAP for the facility. Do not alarm campers and try to keep them calm.

   (1) Immediately account for all campers and secure them in the nearest interior room, preferably without windows.

   (2) Lock doors/windows, close blinds/curtains, and turn off equipment/devices that emit light/sound.

   (3) Barricade doors/windows with furniture and equipment.

   (4) Prevent anyone from exiting the facility until receiving the “All Clear” or directed to evacuate.

   c. Call 911 to report relevant information such as gunshots or suspect’s movements. Silence phones and control communication until direction is received from police.

5. Missing Child Procedures

Only the Camp Director should implement this plan.

a. Secure all campers in one location.

b. Alert the Camp Director.

c. Check with camper’s friends and roommate, all staff members and volunteers, and Hall Directors in case camper has gone with a camp adult for an emergency need. Have someone check the camper’s room.

d. If camper is still not found, alert ASU Police to make systematic search of campus.

e. Contact camper’s parent/guardian in the event the camper cannot be located.

III. Communication Plan
Camp Directors, staff members, and volunteers should share their cell phone numbers to maintain contact and ensure timely communications throughout the duration of the camp.

1. Staff members and volunteers should limit phone calls or texting during camp hours except to facilitate camp activities or for emergencies.

2. Campers should be required to keep phones on silent and limit use to designated breaks.

A. Frequently Used Camp Numbers

<table>
<thead>
<tr>
<th>Service</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Special Events</td>
<td>325-942-2021</td>
</tr>
<tr>
<td>Housing &amp; Residential Programs</td>
<td>325-942-2035</td>
</tr>
<tr>
<td>University Recreation</td>
<td>325-942-2034</td>
</tr>
<tr>
<td>ASU Police Department</td>
<td>325-942-2071</td>
</tr>
<tr>
<td>Facilities Management</td>
<td>325-942-2355</td>
</tr>
<tr>
<td>Environmental Health, Safety &amp; Risk Management</td>
<td>325-942-2180</td>
</tr>
</tbody>
</table>

Camp Directors should develop a communication plan in the event that a camper’s parent/legal guardian needs to be notified or they are attempting to contact their camper.

IV. Definitions

The following definitions have been developed solely for the purpose of this handbook.

A *Camp* is defined as an educational, athletic, and recreational, or other activity or event that is operated or sponsored by the university at any location (on or off campus) or by a third party on ASU property in which one or more minors participate.

A *Minor* is an individual who is less than 18 years old and is not enrolled as an ASU student.

A *Camper* is typically a minor who is attending a Summer Camp.

A *Camp Director* is the person who is designated to direct the camp, supervise camp staff and volunteers, and makes decisions and implements actions to ensure the safe, compliant, and lawful operation of the camp.

A *Camp Staff Member* is typically a paid position which is filled by persons over the age of 18 and may include, but is not limited to, directors, assistant directors, medics, counselors, coaches, lifeguards, instructors, and administrators.

A *Camp Counselor* is an (ASU) student, faculty, staff or volunteer who:

- is 18 years of age or older,
- has been designated by the Camp Director to serve as a counselor,
- has direct contact with campers,
- has passed the background check requirements, and
• has successfully completed ASU Youth Protection Training within the past 2 years.

A Camp Sponsor, for University Camps for an affiliated Third Party Camp, is an ASU faculty or staff member to whom the Approving Authority has delegated the coordination of the camp to include those operated by a third party on ASU property. He/she oversees all aspects of camp coordination and has the authority to make decisions to ensure the safe operation of the camp.

Departmental Authorization is obtained through the department head who has the authority to allocate resources and ensure the camp is coordinated and conducted in accordance with the ASU Summer Camps & Conferences procedures and the ASU Summer Camps Handbook requirements.

An Approving Authority is an ASU vice president, dean, or equivalent director, such as the Director of Athletics, who is responsible for ensuring the camp is relevant to the mission of the university and meets all of the requirements set forth in the ASU Summer Camps Handbook.
Angelo State University
Camp Application Form

CAMP INFORMATION

Camp Name: __________________________________________
Location: ___________________________________________ Dates: __________________________
Website Address: ___________________________________ Type of Camp: ☐ University ☐ Third Party
Number of Participants: _______ Age Range: _____________ Number of Counselors: ________

CAMP SPONSOR INFORMATION

Department/Organization: ________________________________
Primary Contact: ______________________________________
Email: ______________________________________ Phone: ___________ Cell Phone: ___________

As Camp Sponsor, I understand that I have and will fulfill the following responsibilities:
1. Comply with the ASU Summer Camps Handbook guidelines to plan and conduct the camp.
2. Maintain necessary reports and documentation and forward to the approval authority and Special Events.
3. Coordinate housing, food service, and use of university facilities/property with Special Events.
4. Ensure budget and insurance requirements are met and coordinate payment of invoices/contracts.
5. Provide the camp schedule and a list of staff/volunteers to appropriate university offices/departments.
6. Ensure staff and volunteers are properly screened and trained.
7. Ensure all camp participants properly complete and submit required forms/documents.
8. Provide Camp Director applicable university policies, emergency procedures, and facility usage guidelines.
9. Provide support/information while the camp is in session and during emergency situations.
10. Assess any damaged or missing property and facilitate reimbursement or compensation.

Briefly explain your camp’s medical treatment procedures (as applicable) for the following:
First Aid Station: ________________________________

Medication Dispensary: ________________________________

Routine/Emergency Medical Services: ________________________________

Camp Sponsor
Name/Title: ________________________________
Camp Sponsor Signature: ____________________________ Date: _________________
*** This section is NOT required for Third Party Camps ***

DEPARTMENTAL AUTHORIZATION

I authorize the sponsorship of this camp through the department under my direction and confirm that it will be coordinated and conducted in accordance with the ASU Summer Camps & Conferences procedures and the ASU Summer Camps Handbook requirements. I also authorize the transfer of funds to pay for related expenses from the account referenced in this application.

Account #: __________________________  Estimated Expenditures: $ __________________________

Department Head Name: __________________________

_________________________  __________________________
Signature of Department Head or Designee  Date

APPROVING AUTHORITY

I approve this camp based on its relevance to the mission of Angelo State University and confirm that it meets the requirements set forth in the ASU Summer Camps Handbook.

Name: __________________________  Title: __________________________

_________________________  __________________________
Signature of Department Head or Designee  Date

***Please forward a copy of this completed form to the Office of Special Events when submitting the Camp & Conference Reservation Request Form***
THE BELOW IS AN EXAMPLE OF A PARTICIPANT RELEASE FORM THAT WILL BE PROVIDED TO YOUR CAMP ADMINISTRATION PRIOR TO YOUR CAMP DATES. PLEASE DO NOT FILL OUT THIS FORM UNTIL YOUR CUSTOM WAIVERS HAVE BEEN PROVIDED TO YOU.

ACKNOWLEDGMENT AND RELEASE AGREEMENT
(GUARDIAN ON BEHALF OF MINOR PARTICIPANT)

This Acknowledgment and Release Agreement ("Release") is entered into as of the date of signature ("Effective Date") between Angelo State University, a Texas public institution of higher education located in San Angelo, Texas ("University") and the adult parent or guardian named below ("Guardian"), on behalf of such Guardian and the minor participant ("Minor") named below.

1. Activity. Guardian desires Minor to enter the University campus and participate in the 2022 Elite Soccer Camp. Activities will include soccer and futsal (indoor soccer) in case of inclement weather. Activities will take place at the ASU soccer field, ASU intramural fields, and at the Center for Human Performance. Camp will begin on 7/9/2022 and will conclude on 7/10/2022 ("Activity").

2. Acknowledgment of Risk. Guardian acknowledges that the nature of the Activity may expose Minor to hazards or risks that may result in personal injury, illness, or death, caused by: (a) engaging in the Activity or events associated with Activity; (b) traveling via any means of transportation to or from the Activity or during the duration of the Activity; (c) exposure to or use of materials, tools, supplies, equipment, machinery, or other items that are associated with or utilized during the Activity or related activities; or (d) exposure to other dangerous conditions associated with the Activity.

3. Representations of Guardian. Guardian represents: (a) Guardian is at least eighteen (18) years of age; (b) Guardian has the requisite capacity and legal authority to execute this Release on behalf of Guardian and Minor; (c) Minor is physically and mentally able to participate in all aspects of the Activity or related activities; and (d) Minor is able to be in the presence of, as well as use, the materials, tools, supplies, machinery, or equipment or other items associated with or utilized during the Activity or related activities.

4. Conduct and Compliance with Laws and Policies. Guardian represents Minor will comply with all applicable federal, state, and local laws, and University operating policies and direction in Minor’s conduct while engaging in the Activity.

5. Release of University. Guardian understands and agrees that University cannot be expected to control or avoid all risks associated with the Activity and related activities; therefore, in consideration of the benefits Guardian and Minor will receive through Minor’s participation in the Activity, Guardian, on behalf of Guardian and Minor, does hereby RELEASE, PROTECT, INDEMNIFY, AND HOLD HARMLESS, UNIVERSITY AND ITS AFFILIATES, REGENTS, EMPLOYEES, AGENTS, AND VOLUNTEERS FROM AND AGAINST ALL CLAIMS AND CAUSES OF ACTION (INCLUDING COSTS AND ATTORNEY FEES) FOR ANY AND ALL DAMAGE TO PROPERTY, PERSONAL INJURY, ILLNESS, DEATH, AND THOSE THAT OTHERWISE OCCUR, ARISING OUT OF ANY ACTIVITIES CONDUCTED BY, WITH, OR UNDER THE AUSPICES OF THE UNIVERSITY, WHETHER CAUSED BY MINOR'S NEGLIGENCE, OR THE NEGLIGENCE, GROSS NEGLIGENCE, WILLFUL MISCONDUCT, OR ACTS OR OMISSIONS OF UNIVERSITY OR ITS AFFILIATES, REGENTS, EMPLOYEES, AGENTS, VOLUNTEERS, OR OTHER PERSON RELATED THERETO.

6. Emergency Medical Treatment. Guardian consents to any emergency medical treatment for Minor that may be required as a result of accident or illness arising out of participation in the Activity or related activities; provided, the cost of any such treatment will be Guardian’s sole responsibility. Guardian acknowledges that University does not provide health and accident insurance for participants engaged in the Activity or related activities.

7. Miscellaneous. This Release shall be construed in accordance with the laws of the State of Texas. If any term or provision of this Release is held invalid or unenforceable, the validity or enforceability of the remaining provisions shall not be affected. Guardian expressly agrees that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Texas. The sole proper place of venue for any dispute arising out of this Release shall be in Tom Green County, Texas. By their signature below, Guardian now agrees to be bound by the terms of this Release for the duration of the Activity or related activities, whether such Activity began prior to, on, or after the Effective Date.
End of Release. Signature page follows.

Minor:

Minor’s Name
Minor’s Cell Phone (if any)

Guardian

Guardian’s Signature
Guardian’s Relationship to Minor

Guardian’s Printed Name
Guardian’s Cell Phone Number

Date
Guardian’s Alternate Phone Number/Email

Emergency Contact (Other than Guardian):

Printed Name
Emergency Contact Phone Number

Relationship to Minor
Alternate Emergency Contact Number/Email
Angelo State University
Camp Medical Information Form

Camp Name: ____________________________ Dates: ____________________________
Camper’s Name: ____________________________ DOB: ____________________________ Gender: ♂ ☐ ☐ F ☐
Cell/Home Phone: ____________________________ Work Phone: ____________________________ Email: ____________________________
Address: ____________________________
City: ____________________________ State: ________ ZIP: ____________

Emergency Contact Information
Contact #1: ____________________________ Relationship: ____________________________
Home Phone: ____________________________ Work Phone: ____________________________ Cell Phone: ____________________________
Contact #2: ____________________________ Relationship: ____________________________
Home Phone: ____________________________ Work Phone: ____________________________ Cell Phone: ____________________________

All information regarding healthcare providers and medical history will be kept in strict confidence and will only be shared in case of an emergency to provide and/or seek appropriate medical treatment.

Healthcare Provider Information
Physician’s Name: ____________________________ Phone #: ____________________________
Health Insurance Co: ____________________________ Policy #: ____________________________
Identification #: ____________________________ Group #: ____________________________

**Please include copy of insurance card**

I understand that if I am at all uncertain about any pre-existing medical conditions or my ability to participate in the prescribed camp activities, it is my obligation to consult with my personal physician prior to participating in this camp.

I understand that the information requested on this form is intended to help inform camp staff of any pre-existing medical, mental, or physical conditions that I may have and that I am responsible for providing an accurate history. I also understand that my failure to disclose relevant information may result in harm to me and/or others during this camp.

I understand that by revealing or disclosing the requested information below it will not be used to determine my ability to participate safely in activities. I understand that, if I choose to participate in activities, I do so voluntarily and of my own accord and the final decision regarding participation is solely my responsibility.
Camper’s Name: ________________________________

Medical History Information
Please answer each question below and explain as indicated if you answer “yes” to any question.

Currently taking any medication?

<table>
<thead>
<tr>
<th>Name of Medication</th>
<th>Strength</th>
<th>Dosage</th>
<th>Frequency</th>
<th>Special Instructions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

Will the medication interfere with ability to safely participate in this camp?
Yes ☐  No ☐
If yes, please indicate the medication and possible mental/physical side effect or impact:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

List a history of, or any medical condition that you or your doctor feels would limit camp participation?
Yes ☐  No ☐
If yes, please identify condition and explain:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

List any allergies or reactions to foods, medications, insect stings, plants, or other materials?
Yes ☐  No ☐
If yes, please explain condition and course of treatment:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Please include any additional medical issues or concerns you feel are important. ________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

I understand that I will need to notify the Camp Director if any changes occur pertaining to my medical, mental, or physical condition prior to the scheduled camp.
Authorization of Treatment and Medical Release Form

I understand and agree that camp staff may, but are not obligated to, administer over-the-counter medications and/or provide first aid for minor injuries and that such treatment will not be done under the supervision of a healthcare provider or medical practitioner.

In case of illness or medical emergency occurring during participation in a camp or related activity, the university, camp sponsor, and their employees, volunteers, or agents may, but are not obligated to, take actions to secure whatever treatment it considers to be warranted under the circumstances. Every effort will be made to notify an emergency contact prior to treatment but this may not be practical. Before medical treatment can be provided, we are required to have a signed medical release to present to the medical provider at the time of treatment.

I ________________ (Camper’s Name) hereby authorize Angelo State University, the camp sponsor, and their employees, volunteers or agents, while participating in this camp, to administer over-the-counter medications or provide first aid treatment and to select medical treatment on my behalf to include giving permission to medical personnel to administer treatment in the event of illness or medical emergency; to release any records necessary for insurance purposes; and to provide or arrange related transportation and I agree to be solely responsible for any and all costs related to that treatment.

I certify that all of the information provided in my medical history is correct and that I am able to participate in all prescribed camp activities. By signing my name below, I understand and agree to all the terms of this authorization and hereby give permission for this form to be printed as proof for medical treatment authorization.

Signature ___________________________ Date __________________

If the participant is under 18 years old; I certify as the parent or legal guardian, that as far as I know, all of the information provided in my child’s medical history is correct and my child has permission to participate in all prescribed camp activities. Furthermore, I have read, understand, and agree to the terms of this authorization as indicated by my signature and hereby give permission for this form to be printed or copied as proof for my child’s medical treatment authorization.

Name (Print) ___________________________ (Parent/Legal Guardian)

Signature ___________________________ Date __________________
Angelo State University
Photography, Video, and Sound Recording Release

During university sponsored events, the images and/or voices of participants may be recorded in various media that are produced to chronicle or market university events.

I ______________________________ hereby grant Angelo State University and the Texas Tech University System the right to record my voice and likeness for use in a print or media production and to make unlimited use of the photographs, videos, and/or sound recordings.

I understand the photographs, videos, and/or sound recordings may be published or distributed by means of a print publication, the internet, video recording, broadcast, podcast, cablecast, film or any similar electronic or mechanical method.

I agree that I do not own the copyright of the photographs, videos, and/or sound recordings and waive any right to inspect or approve the final uses of the photographs, videos, and/or sound recordings.

I certify that I am at least 18 years old, have read and understand the terms of this agreement, and am legally bound to its terms as evidence by my signature.

Signature ____________________________________________ Date _______________________

If the participant is under 18 years old, I am signing as the parent or legal guardian and have read and understand the terms of this agreement and am legally bound to its terms as evidence by my signature.

Name (Print) ____________________________________________

(Parent/Legal Guardian)

Signature ______________________________________________ Date _______________________

ASU Summer Camps Handbook 1 Attachment 4 (1/2023)
Camper Accident/Incident Report

<table>
<thead>
<tr>
<th>Location of Accident/Incident:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Time:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Camper Name:</th>
<th>Camper Phone Number:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Parent/Guardian Name:</th>
<th>Parent/Guardian Phone Number:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Camp Director Name:</th>
<th>Camp Director Phone Number:</th>
</tr>
</thead>
</table>

Briefly describe the accident/incident

<table>
<thead>
<tr>
<th>Was Camper Injured?</th>
<th>Briefly describe injury:</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ YES</td>
<td>☐ NO</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Received medical treatment?</th>
<th>Dr. Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ YES</td>
<td>☐ NO</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Transported for treatment?</th>
<th>Transported By:</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ YES</td>
<td>☐ NO</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>University Police Responded?</th>
<th>UPD Officer:</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ YES</td>
<td>☐ NO</td>
</tr>
</tbody>
</table>

STATEMENT ATTACHED WITNESS NAME & PHONE NUMBER

| ☐ YES | ☐ NO |
| ☐ YES | ☐ NO |

Additional Information:

Camp Director Signature: Date: 
Department Head Signature: Date:
Angelo State University
Camp Insurance Requirements

The following are required to be returned to ASU Special Events no later than 10 business days prior to your camp or conference arrival on campus to confirm your reservations. **Failure to provide timely and acceptable evidence of insurance may result in cancellation of your reservation.**

1. The Camp Sponsor of Third Party Camps shall obtain and maintain the following insurance coverage.

   A. Commercial General Liability insurance at least as broad as the ISO standard form CG 00 01 with limits not less than $1,000,000. Angelo State University and the Texas Tech University System shall be included as an additional insured with coverage at least as broad as the ISO standard form CG 20 10.

   B. Commercial or Business Auto Liability insurance at least as broad as the ISO standard form CA 00 01 with limits not less than $1,000,000. Angelo State University and the Texas Tech University System shall be included as an additional insured if the policy does not include the standard omnibus insured definition.

       (1) Commercial Auto Liability coverage is not required for privately owned vehicles that will only be transporting campers to and from campus.

   C. Sexual Abuse and Molestation coverage with limits not less than $1,000,000 per occurrence or claim with an aggregate limit of $1,000,000. Angelo State University and the Texas Tech University System shall be included as an additional insured.

   D. Workers’ Compensation insurance covering all employees where required by law.

2. Angelo State University and the Texas Tech University System are state institutions of higher education. The Texas Legislature has limited the liability of state agencies through the Texas Tort Claims Act. Third Party Camp insurance shall be primary and any insurance or self-insurance of Angelo State University or the Texas Tech University System shall not contribute to any claim or loss. The minimum liability insurance requirements listed above include waivers of subrogation.

3. The listed insurance requirements shall not be considered to be appropriate or sufficient for any risk or exposure to injury, damage, or loss. Third Party Camp sponsors should discuss their own insurance requirements with their insurance agent or broker.