

# Can We Build It? Yes We Can!

(and your class can watch)



MUSC Children's Health and The Robins & Morton/Cumming/Brownstone Construction Management Team invite your class to explore the construction of South Carolina's next great children's hospital—**MUSC Shawn Jenkins Children's Hospital** and **Pearl Tourville Women's Pavillion**.

- Wear a real hard hat and explore the dirt, gravel and steel of a major construction site
- Learn how to stay safe in and around active work zone
- Watch a crane operator working over 11-stories up in the sky
- Interview an architect and find out what it takes to design a hospital just for children
- Learn how we're building a hospital that's strong enough to withstand a hurricane
- Discover future career opportunities

Guided tours of the new Shawn Jenkins Children's Hospital and Pearl Tourville Women's Pavilion will take your students on a once in a lifetime journey that allows them to interact with our design and construction teams. For more information or to schedule a tour, visit [buildingmusccchildrens.com/school-field-trips](http://buildingmusccchildrens.com/school-field-trips) or call **843-876-8588**.

Together let's Imagine What's Possible.



*Campaign For*

**musC Shawn Jenkins  
Children's Hospital**  
Medical University of South Carolina





# Construction Site Tour

MUSC Shawn Jenkins Children's Hospital and Pearl Tourville Women's Pavilion

**SCHOOL NAME/GRADE LEVEL Construction Site Visits**  
**DATE**

**MEETING ADDRESS:**

Robins & Morton/Cumming/Brownstone Construction Office  
3 Charleston Center Drive  
Charleston, SC 29401

<b>10:15 AM</b>	Class Arrival
<b>10:15 AM – 10:25 AM</b>	Construction Team Introduction
<b>10:25 AM – 10:45 AM</b>	Safety Presentation
<b>10:45 AM – 11:00 AM</b>	About the Construction Project
<b>11:00 AM – 11:30 AM</b>	Jobsite Tour
<b>11:30 AM – 12:00 PM</b>	Return to Construction Office for Q&A
<b>12:00 PM</b>	Class Departure

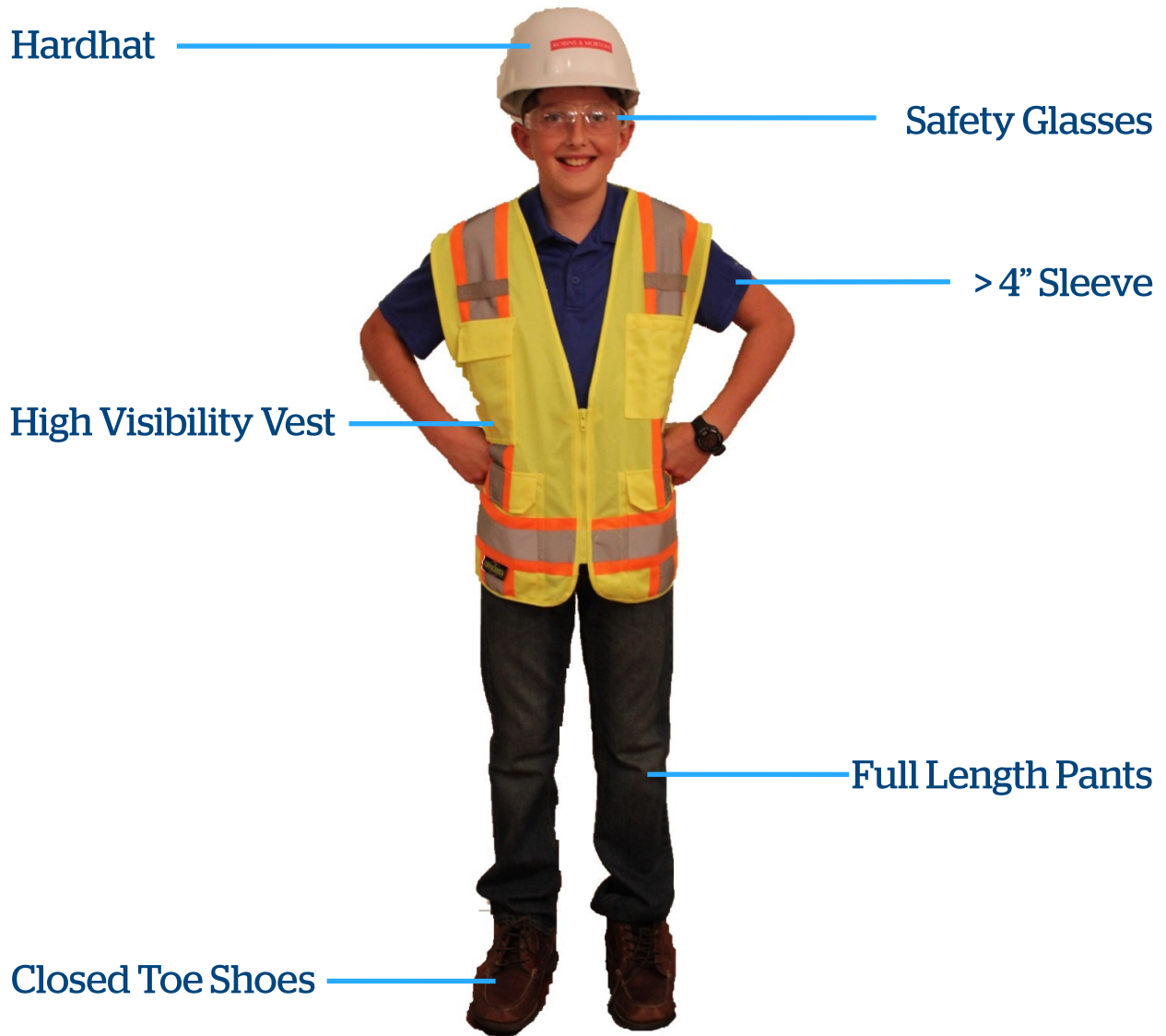
\*Lunch is not provided by the construction team however bag lunches are welcome if you would like to eat lunch during or after your visit.

\*Program content is flexible and can be tailored to meet each group's needs.

\*If a student is not able to be photographed, please cross out Section #2 of the *Construction Site Visit Consent Form, Release and Waiver of Liability*.

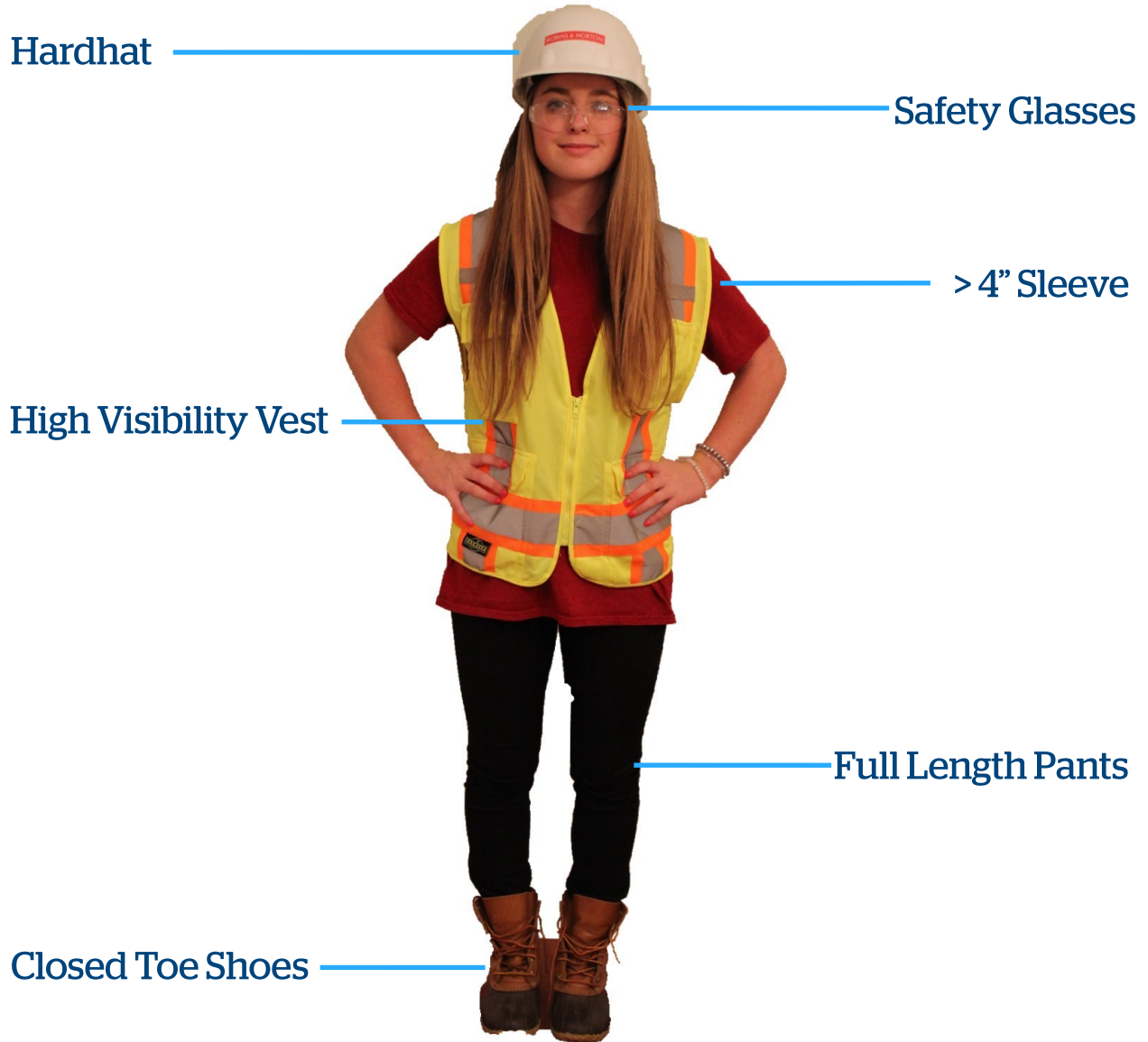
# Gear Up For Safety!

Construction Site PPE (Personal Protective Equipment)



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## Construction Site Visit Consent Form, Release and Waiver of Liability

Date of Site Visit: \_\_\_\_\_

Location: **Shawn Jenkins Children's Hospital & Pearl Tourville Women's Pavilion** ("Facility")

I hereby give consent for \_\_\_\_\_ ("Visitor"), to  
Print Name

participate on the above-referenced Construction Site Visit. I understand that such Visitor will be accompanied by employees of the **Robins & Morton/Cumming/Brownstone** ("R&M/C/B") construction team and/or employees of the **Medical University of South Carolina** ("MUSC") and/or the **Medical University Hospital Authority** ("MUHA"). I hereby acknowledge, agree and represent that I am aware that the Facility is under construction and that a construction site is a dangerous environment, despite precautions for safety being taken by the Facility, contractor and trade contractors performing work at the project site. I further understand that certain risks are involved in visiting a construction site.

In consideration of the permission granted to Visitor by R&M/C/B, MUSC and MUHA to participate in the Construction Site Visit indicated above, I hereby agree as follows:

1. To the fullest extent permitted by law, to release, waive, discharge, hold harmless, defend, and indemnify R&M/C/B, MUSC and MUHA (including their respective affiliated entities) and their individual officers, administrators, employees and agents, acting officially or otherwise (the "Releasees"), from any and all claims, suits, demands, damages, losses, judgements, payments, awards, and expenses (including reasonable attorney's fees and costs) that may arise in connection with this Construction Site Visit or any harm that occurs to Visitor and/or liability which arises out of their participation in the Construction Site Visit; including, but not limited to, liability for property damage or loss, or bodily, personal or mental injury, including death.
2. I further hereby consent to the participation of Visitor in interviews, the use of quotes, and the taking of photographs, movies or videotapes by R&M/C/B, MUSC and/or MUHA. I also grant R&M/C/B, MUSC and/or MUHA the right to edit, use and reuse said products for non-profit purposes including use in any public media, including radio, television, digital, internet or print, or in a MUSC Children's Health publication. I understand that the intended use of such images may include advertising, marketing, fundraising or promotional purposes of MUSC Children's Health. I acknowledge that this consent and authorization is being made solely for the benefit of MUSC Children's Health and without any expectation of compensation or other benefit to Visitor. To the



extent that any benefit accrues or might accrue to MUSC Children's Health from the use of images or disclosure of information, I hereby and forever waive any interest in or claim to such benefits. I further hereby release and forever discharge the Releasees from any and all claims, liability, actions, suits, demands, costs, expenses or indebtedness arising out of, related to, or in any way connected with the use of images or disclosure of information and materials described herein, and I hereby waive any interest in or claim to such information and materials.

**I have read this Construction Site Visit Consent Form, Release and Waiver of Liability carefully, understand its significance, and voluntarily agree to all of its terms.**

Print Visitor's Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Emergency Contact Number: \_\_\_\_\_

*In the event that Visitor is under the age of eighteen (18) years, a parent or other legally authorized representative (e.g., guardian) must sign below indicating permission for participation and agreement to all of the terms above.*

**SIGNATURE OF PARENT OR GUARDIAN OF STUDENT VISITOR**

Print Name: \_\_\_\_\_

Relationship to Visitor: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_