

DO YOU THINK YOU HAVE WHAT
IT TAKES TO BE THE NEXT HIT
VIDEO GAME CREATOR?

ARE YOU INTERESTED IN
THE ART, DESIGN AND/OR
PROGRAMMING OF VIDEO GAMES?

If so, Shawnee State University is
offering three week-long gaming camps
that might get you started on the
path to becoming a game designer.

SUMMER GAME DESIGN CAMPS

at Shawnee State University



CAMP I: GAME CREATION USING AN ENGINE (AND A LITTLE PROGRAMMING)

JUNE 12-16 / 9AM-3PM / M-F

INSTRUCTOR: JASON WITHERELL

game programming faculty / shawnee state university

This camp will explore game creation at a high-level using an existing 2D game engine. Each day, you'll be guided through hands-on tutorials in which we'll create simple but functional games (and pieces of games). You'll be exposed to a little bit of programming, but the focus will be on creating simple games. Each day will end with a fun gaming-related activity. The last portion of the camp will focus on collaborating with other students and the camp leaders to produce a game that you can show off to your friends and family in the closing ceremonies.

To register or for more information email:
mspicer@shawnee.edu

[SEE BACK FOR MORE DETAILS](#)



CAMP II: GAME ART+DESIGN

JUNE 19-22 / 9AM-4PM / M-TH

INSTRUCTOR: GREG LYONS

gaming arts faculty / shawnee state university

This camp will cover the creation of 3D art assets as used in contemporary 3D games and designing levels for play. The students will be shown how to create and texture their own 3D meshes, import them into an engine. The students will then be taught to create interactivity for their game. Each level will be functional and have game elements integrated to provide play and immersion. The students will be exposed to the software Autodesk Maya, the Unreal Engine 4 and various texturing processes. Upon completion, each student will have their own game levels where they are the artist/designer.

CAMP III: GAME PROGRAMMING

JULY 10-14 / 9AM-3PM / M-F

INSTRUCTOR: JASON WITHERELL

game programming faculty / shawnee state university

This camp will focus more on "pure" programming. We'll use the C# programming and the MonoGame framework (used in games such as Axiom Verge, Bastion, Stardew Valley, etc.) The focus will be on programming in a gaming setting. We'll cover topics such as if statements, repetition, functions, object-oriented programming, arrays, etc. This camp is ideal for those considering careers in STEM-related fields.

CAMP COST
\$285
PER PERSON
PER CAMP
(lunch included)

SUMMER GAME DESIGN CAMPS

at SHAWNEE STATE
UNIVERSITY



GREG LYONS

is a professor of 3D Animation & Design, as well as owner of Outlandvfx, a digital content creation firm. Greg began working in digital 3D in the 90s bridging the gap from his traditional fine arts education and the ever increasing utilization of computers to produce art and design. After completing his undergraduate studies and working in advertising, Greg left a position as an assistant art director to return to school. He completed his MFA at the Memphis College of Art, Memphis, TN. Greg has since worked in studios on both the east and west coasts of the US as well as in London, UK, and Australia. Additionally, his company Outlandvfx develops content for local as well as international clients. His research interests range from architecture and archeology to human kinetics and motion capture.



JASON WITHERELL

is a faculty member in the game programming degree at Shawnee State since January 2006. His teaching / research interests involve programming, artificial intelligence, game engine use / creation, animation, and team-based projects. He loves creating video games (and playing them from time to time). His favorite game of all time is King's Quest 2 (look it up, youngsters!). He's the proud father of three and lives in the Portsmouth, Ohio area.

REQUIREMENTS + NOTES:

- **Campers must be at least 15 years of age**
- **Campers must have basic computer knowledge:**
 - **Navigating files and folders in a Windows 7/10 environment**
 - **Using an internet browser (and saving images)**
 - **Be an OK typist (about 5–10 words per minute)**
- **Computers are available. If you wish to bring your own laptop, we'll help you install the needed software.**

SUMMER GAME DESIGN CAMPS REGISTRATION FORM: QUESTIONS? PLEASE CALL MISTIE: 740.351.3635

WAYS TO REGISTER FOR CAMP:

Mail: Shawnee State University Gaming Day Camps, Academic Events & Partnerships, 940 Second Street, Portsmouth OH 45662-4344

Email: mspicer@shawnee.edu

Phone: 740.351.3635

In person: Our office is open M-F, 8 am – 5 pm. We are located in the Vern Riffe Center for the Arts, Room 211

Please complete this form and choose a Payment Option below. Please print legibly.

Child's First Name _____ MI _____ Last Name _____ Age _____

Cell Phone _____ Home Phone _____

E-mail _____ School _____

Home Address _____ City _____ State _____ Zip _____

Emergency Contact _____ Emergency Contact Phone Number _____

Special Needs of Participant (Accessibility, dietary, etc.) _____

I AM REGISTERING FOR:

\$285 **CAMP I: GAME CREATION USING AN ENGINE** M-F **June 12-16** 9 am-3 pm *Lunch included*

\$285 **CAMP II: GAME ART + DESIGN** M-TH **June 19-22** 9 am-4 pm *Lunch included*

\$285 **CAMP III: GAME PROGRAMMING** M-F **July 10-14** 9 am-3 pm *Lunch included*

\$ _____ **Total**

SUMMER GAME DESIGN CAMPS PAYMENT OPTIONS:

CASH¹

Register in person: Shawnee State University
Vern Riffe Center for the Arts, Room 211
Monday–Friday | 8am–5pm

¹Cash must be hand-delivered

CHECK / MONEY ORDER

Mail a check/money order, payable to Shawnee State University, with your completed form to:

Office of Academic Events & Partnerships
Shawnee State University
940 2nd Street, Portsmouth OH 45662

CREDIT CARD

Register in person: Shawnee State University
Vern Riffe Center for the Arts, Room 211
Monday–Friday | 8am–5pm

Or by calling Mistie: 740.351.3635
(Credit card only)

Course Cancellations: The Office of Academic Events & Partnerships will make every effort to maintain the scheduled day camps. However, events such as instructor illness or insufficient enrollment may require a schedule adjustment or cancellation. We will notify participants of any course changes, and issue a full refund for course cancellation.

Refund Policy: Students withdrawing from a class at least three full business days prior to the start date of a class will receive a full refund minus a 10% processing fee. No other refunds will be granted.

PARENTAL CONSENT AND RELEASE: SUMMER GAME DESIGN CAMPS 2017

Child's First Name _____ MI _____ Last Name _____ Age _____

The undersigned, as parent or guardian of the child named above, consents that my child participate in Shawnee State University's program, **Gaming Day Camps**. I acknowledge that the child named is a minor under the age of 18.

I acknowledge that the Program includes indoor and outdoor activities of the nature that may expose the child to hazards or risks that may result in illness, personal injury or death. I understand and appreciate the nature of such hazards and risks.

Although a minor, my child is aware of the risks involved in participating in the program. I assure Shawnee State University that I have carefully counseled my child on the risk of participating. Further, I assure Shawnee State University that there are no physical or other reasons that preclude my child from participating in the program.

I agree that all requirements, directions and standards set by Program staff, use of any equipment or supplies under the supervision of the staff, shall be deemed to have been accomplished for the benefit of my child.

I hereby release and discharge Shawnee State University, its board of Trustees, officers, employees and agents associated or connected with the Program from every claim, liability or damage of any kind that may result from my child's participation in the Program.

Parent/Guardian's Printed Name _____ Date _____

Signature _____

PHOTO AND MEDIA RELEASE: SUMMER GAME DESIGN CAMPS 2017

By submitting this form, I the undersigned, grant permission to Shawnee State University (SSU) and/or the Shawnee State University Development Foundation (SSUDF) to publish my story and/or likeness and/or picture for use in promotional, educational, display or other media publications including newspapers, magazines, television, brochures, pamphlets, instructional material, books, web pages and/or other educational or promotional material.

I hereby grant SSU and/or SSUDF permission to interview me and/or to use my likeness in photograph(s)/video in any and all of its publications and in any and all other media, whether now known or hereafter existing, controlled by SSU and/or SSUDF, in perpetuity, and for other use by the SSU and/or SSUDF. I will make no monetary or other claim against SSU or SSUDF for the use of the interview and/or the photograph(s)/video.

Child's First Name _____ MI _____ Last Name _____ Age _____

Year in School (freshman – senior) _____ School _____

Home Address _____ City _____ State _____ Zip _____

Cell Phone _____ Home Phone _____

Parent/Guardian's Printed Name _____ Date _____

Parent/Guardian's Signature _____

EMERGENCY MEDICAL & RELEASE FORM: SUMMER GAME DESIGN CAMPS 2017

Registration is complete when the student registration and emergency medical forms are received and payment is accepted. Please mail the completed forms to the address above or call us at 740.351.3635 to register by phone.

Child's First Name _____ MI _____ Last Name _____ Age _____

Mother/Legal Guardian _____ Phone number while student is in class _____

Father/Legal Guardian _____ Phone number while student is in class _____

Child's Physician _____ Phone _____

Doctor's Hospital Affiliation _____ Address _____

Child's Dentist _____ Phone _____

MY CHILD HAS THE FOLLOWING MEDICAL CONDITION(S):

Convulsive Disorder Diabetes Allergies (i.e. stings, food allergies) Other _____

Please describe symptoms and precautions of any medical conditions and list any allergies that you child may have: _____

Current Medications _____

Medical Insurance Company _____ Name of Policy Holder _____

EMERGENCY CONTACTS:

Name _____ Phone _____

Name _____ Phone _____

Name _____ Phone _____

IMPORTANT:

The following people have my permission to pick up my child from Gaming Day Camps:

Name _____ Phone _____

Name _____ Phone _____

Name _____ Phone _____

The undersigned, as parent or guardian of the child named above, desires that my child participate in Gaming Day Camps. By execution of this Release, I agree that all requirements, directions and standards set by staff, use of any equipment or supplies under the supervision of the staff, shall be deemed to have been accomplished for the benefit of my child. I grant permission that any pictures taken containing my child may be used for future promotional purposes. In the consideration of Shawnee State University's efforts on my child's behalf, I do hereby voluntarily assume all risk of accident, injury, damage and/or loss of my child's property that may arise out of my child's participation in Gaming Day Camps, hereby intending to release and discharge Shawnee State University, its board of Trustees, officers, employees and agents associated or connected with the program from every claim, liability or damage of any kind caused by negligence of Shawnee State University, its Board of Trustees, officers, employees or agents involved or otherwise that may result for my child's participation in Gaming Day Camps. By my signature I acknowledge that the child named is a minor under the age of 18. Although a minor, my child is aware of the risks involved in participating in the program. I assure Shawnee State University that I have carefully counseled my child on the risk of participating. Further, I assure Shawnee State University that there are no physical or other reasons that preclude my child from participating in the program. I authorize Shawnee State University to obtain such medical care, emergency or otherwise, that it may in its sole discretion deem necessary for my child. Further, I assure Shawnee State University that I have adequate health insurance or personal funds to provide payment for all costs of medical care necessary for my child. I agree to indemnify and hold harmless Shawnee State University for any costs associated with such care.

Required Signature _____ Date _____