

Contra Costa Alternative School dba  
**Holden High School**  
10 Irwin Way, Orinda, CA 94563  
**SUMMER EXTENSION ENROLLMENT AGREEMENT**  
Summer, 2018

I hereby accept Holden High School's (referred to as Holden or the School) offer of enrollment and register \_\_\_\_\_ (Student) for the 2018 Sound Engineering Summer Camp for Teens. In consideration of this reservation by Holden High School the undersigned agrees to pay the required non-refundable fees as specified.

\_\_\_\_ Week 1 (July 30 - August 3)      \$750  
\_\_\_\_ Week 2 (August 6 - August 10)      \$750  
\_\_\_\_ Week 1 + Week 2                      \$1300 (Save \$200)

Total Enclosed: \$ \_\_\_\_\_      Check # \_\_\_\_\_      Registered: Online

**Program**

No portion of the Summer School tuition is refundable or will be waived or excused for absence, suspension, expulsion, or withdrawal before the completion of camp. The School reserves the right to end this agreement at any time.

**A. ENROLLMENT, FEES and CANCELLATION FEE AGREEMENTS**

1. a. The School shall refund no portion of summer camp fee unless the summer program is cancelled due to low enrollment.  
b. Parent/Guardians agree to pay a \$25 fee for each returned check.  
c. Parent/Guardians agree to pay, to the extent permitted by law, the School's expenses of enforcement and collection of the fee.

**B. OTHER AGREEMENTS**

1. Parent/Guardians and Student acknowledge that they will adhere to the rules listed below:
  - Respect yourself, other people, and the campus
  - Be sexually appropriate in behavior and language
  - Treat people with equality and equity
  - Be peaceful
  - No substance use
  - No crimes
2. Parent/Guardians grant permission for Holden to use pictures of Students in school publications and/or newspapers or media or website for promotional purposes.
3. Parent/Guardians hereby consent and authorize the School to render any emergency or medical treatment or first aid treatment deemed necessary by the School for as long as Student attends the camp.

Parent/Guardian Initial \_\_\_\_\_  
Parent/Guardian Initial \_\_\_\_\_

Student Initial \_\_\_\_\_

4. Parent/Guardians hereby acknowledge that the School will not be held liable for medical care for specific medical conditions. It is understood that the Parent/Guardian's own health plan is the primary carrier for the medical/dental expenses related to any injury sustained by any Student at camp.
5. Parent/Guardians acknowledge that the School cannot maintain constant supervision of all Students at all times. Therefore, Parent/Guardians agree to assume the risk of normal living and play and the risks of any disobedient conduct on the part of Students.
6. Holden High School's duties and obligations under this agreement shall be suspended immediately without notice during all periods that the School is closed because of events beyond its control including, but not limited to, any fire, war, governmental action, acts of terrorism, epidemic, pandemic, or any other event. If such an event occurs, Holden High School duties and obligations in this agreement will be postponed until such time as Holden High School, in its sole discretion, may safely reopen.
7. Holden makes no guarantee that credits will be accepted by other schools.

By signing below, I agree to accept the terms of this Agreement and the rules and regulations of Holden High School as set forth in this agreement.

Parent/Guardian Printed Name: \_\_\_\_\_

Phone: \_\_\_\_\_ email: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Phone: \_\_\_\_\_ email: \_\_\_\_\_

Parent/Guardian Printed Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student Name: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student email: \_\_\_\_\_

Emergency Contact:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship to student: \_\_\_\_\_

Health Plan and number: \_\_\_\_\_

Primary Doctor: \_\_\_\_\_ Phone: \_\_\_\_\_

Parent/Guardian Initial \_\_\_\_\_  
 Parent/Guardian Initial \_\_\_\_\_

Student Initial \_\_\_\_\_