

Math Academy Summer Camp

June 11th – June 22th, 2018

STUDENT CONSENT FORM

By signing this statement, I am agreeing to abide by the following academic and conduct codes:

I, _____
Student First Name Student Last Name

- ✓ Will be on time for all program activities and remain until their completion.
- ✓ Will complete all assignments and maintain a positive attitude toward academic requirements.
- ✓ Will cooperate with all instructors and assistants and fellow participants.
- ✓ Will not interfere in any way with normal classroom procedures established by the instructors and assistants.
- ✓ Agree to abide by the Doral Academy Rules and Regulations.
- ✓ If I do not abide by acceptable standards of conduct and/or do not meet academic requirements, I will not be allowed to continue in the program and will be asked to leave immediately.

Student Signature Date: ____/____/____
Month Day Year

STUDENT IS UNDER 18 YEARS OLD BUT HAS PARENT/GUARDIAN PERMISSION TO WALK HOME: YES NO

STUDENT IS UNDER 18 YEARS OLD BUT HAS PARENT/GUARDIAN PERMISSION TO USE PUBLIC TRANSPORTATION TO GET HOME: YES NO

Parent/Guardian Name: _____
Last First M.I.

Parent/Guardian Signature Date: ____/____/____
Month Day Year