



# HEALTH SCIENCE AND TECHNOLOGY ACADEMY SUMMER 2011 - STUDENT CONTRACT

**Fun with Science, Forensics, Biomed or Senior Component**  
(Please circle which camp you will attend.)

I, \_\_\_\_\_, the undersigned student in \_\_\_\_\_  
County, plan to attend the HSTA Summer Institute at West Virginia University, Marshall University or WV State  
University.

I understand that the staff of the summer program strives to maintain a strong quality program. I understand that I am  
expected to act appropriately - maintaining good and responsible behavior at all times. I understand and agree to abide  
by all the HSTA Rules and Regulations, some of which are:

1. I am required to submit all summer forms required of me to my field site coordinator prior to summer  
camp or I will not be allowed to attend.
2. I will be required to go home if I sustain an injury during the summer program that impacts my mobility.
3. I am required to attend, participate, and be punctual for all classes, workshops, and other scheduled  
activities.
4. I am required to stay in the assigned residence hall.
5. I will not damage or deface property. If I do deface property, I will assume financial responsibility for the  
damaged items.
6. I will not consume or possess any form of tobacco, alcoholic beverage, or illegal drug.
7. I will not take other's possessions without the owner's permission (stealing).
8. I will not disrespect or disregard HSTA Staff, Mentors, Administrators, or teachers.
9. I understand that females are not permitted on the male floors and males are not permitted on the female  
floors.
10. I agree to follow my school's 'Acceptable Computer/Internet Use' policy as well as the 'WVU  
Computer/Internet Use' policy for all HSTA activities.
11. I agree to abide by the set HSTA Dress Code.
12. I agree to follow safety guidelines and recommendations from the HSTA Instructor and teachers for all  
summer activities.
13. I agree I will not be permitted to attend, or leave campus for, other programs or activities not related to  
HSTA while at the HSTA Summer Institute.
14. I agree to follow all other rules and regulations implemented by HSTA.

I further understand, if I commit any one of the above infractions, I may be sent home immediately and may not be  
allowed to participate in future HSTA campus programs.

By signing below, I understand that the primary purpose of the summer HSTA program is educational and that I share  
in the responsibility of achieving the goals of the program. I agree to put forth my best effort at all times.

\_\_\_\_\_  
**Student Signature**

\_\_\_\_\_  
**Date**

I have read the above contents and I agree to the aforementioned. In the event my child is dismissed from the campus  
program, by signing this form, I agree to come to campus immediately to pick him/her up. If I am unable to provide  
transportation, I give HSTA permission to transport my child home.

\_\_\_\_\_  
**Parent/Legal Guardian Signature**

\_\_\_\_\_  
**Date**

**Please check your preferred T-shirt size:**

- Small     Medium     Large     X-large     XX-large     XXX-large