ADVENTURES 2012
Acceptance Form

Student Name: ___________________________  Parent/Guardian Name: ___________________________

(Please Print Clearly) (Please Print Clearly)

Adventures Class(es): June 18-22 June 25-29

_________ ___________ ___________

Permission to Pick Up:

1. Friends or family members PERMITTED to pick up student from campus: ________________________________

2. Name of any person NOT PERMITTED to pick up student from campus: ________________________________

3. Is student permitted/expected to take CyRide bus to/from campus daily? (Circle One) YES NO

   (If YES, please make sure student knows how and where to catch Cy-Ride.)

Student Behavior Guidelines: The OPPTAG Program expects that all participants will be respectful and
courteous to all staff and students. Please read the ADVENTURES Code of Conduct, sign and return along with
the Acceptance Form.

I, _____________________________, accept my position/space in the 2012 Adventures Program and will
abide by the behavior guidelines.

I, _____________________________, shall be responsible for paying all applicable fees in exchange for my child’s
participation in the OPPTAG Summer Program. I understand that the good faith deposit is due no later than June 1, 2012, and the
remaining balance is due prior to the first day of class. If the balance is not paid at that time, I understand that ISU may deny my
child’s participation in the 2012 OPPTAG Summer Program. If ISU opts to allow my child to participate despite the non-payment of
the complete amount at check-in, I understand that ISU will continue to bill me, and that I am responsible for paying such bills in a
timely manner. I further understand that I will be responsible for paying any finance charge imposed by ISU on unpaid bills and any
collection costs and attorney’s fees should ISU refer my account for collection.

I also understand that the application fee of $35 is non-refundable. Once this Acceptance Form is signed and submitted, I understand
that a $100 administrative fee will be retained for cancellations. If my student cancels AFTER June 1, 2012, or fails to check-in and
attend camp, I am responsible for 100% of their application and tuition fees.

SIGNED ___________________________  SIGNED ___________________________

(Student Signature) (Parent/Guardian Signature)

DATE _____________________________

Note: Please return this acceptance form by June 1, 2012. If we have not received this form AND your deposit by this date, you will
forfeit your space in the selected class(es).

This form will be photocopied and shared with the ADVENTURES instructor.
Return to OPPTAG, Iowa State University, 357 Carver Hall, Ames, IA 50011-2060, BEFORE June 1, 2012
You may fax your forms to 515-294-3505