



## 2012 Enrollment Application

### Critical Information

*Application Deadline: April 30, 2012*

*Conference Date: June 21 - July 1, 2012*

*Tuition Deposit: \$250*

(due with application and credited toward full tuition payment - see Payment Information)

*Please complete all fields.*

### Applicant Information

Name (First/Middle Initial/Last): \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Area Code/Phone: \_\_\_\_\_

Area Code/Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Date of Birth (mm/dd/yyyy): \_\_\_\_\_

Name for Mock Trial Academy I.D. (*if different than above*): \_\_\_\_\_

Female  Male      Adult T-shirt size: (*circle one*) S M L XL

Course:  Trial Advocacy I  Trial Advocacy II

(See Course Options page regarding prerequisite experience)

Referred by: (*If a previous MTA student referred you to MTA, please indicate that person's name*)

Referrals: (*For MTA Alumni only, please list each person you've referred to MTA. Separate multiple names with a coma.*)

How did you hear about Mock Trial Academy?



**Parent/Guardian Information**

Parent/Guardian Name (First/Middle Initial/Last): \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Area Code/Home Phone: \_\_\_\_\_

Area Code/Work Phone: \_\_\_\_\_

Area Code/Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Emergency Contact Information**

Contact Name: \_\_\_\_\_

Daytime Area Code/Phone Number: \_\_\_\_\_

Evening Area Code/Phone Number: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

**Applicant's High School Information**

High School: \_\_\_\_\_

Street Address: \_\_\_\_\_

City:State:Zip Code: \_\_\_\_\_

Cumulative GPA: \_\_\_\_\_ on a scale \_\_\_\_\_ .

Current year in school: \_\_\_\_\_ Year of High School Graduation: \_\_\_\_\_

**Extracurricular Activities and/or Community Involvement:**

(list relevant mock trial experience, if any)

**Special Dietary Information**

Does applicant require any special dietary arrangements?

Yes  No If yes, please explain: \_\_\_\_\_

**Medical Information**

Does applicant have any medical condition or disability that may affect applicant's participation in the conference or require special arrangements?

Yes  No If yes, please explain: \_\_\_\_\_

Will Applicant take any prescription medication during the conference?

Yes  No If yes, please provide a copy of the prescription to Mock Trial Academy before the first day of the conference.



### **Payment Information**

#### *Tuition deposit:*

A tuition deposit in the amount of \$250 is required with each student's application to Mock Trial Academy. Our Cancellation and Refund Policy applies to this deposit, as well as all other monies paid to Mock Trial Academy.

If a student's application is accepted, to reserve his or her spot in the program, the student will be required to pay Mock Trial Academy the balance of his or her \$2,000 tuition (\$1,750) by April 30, 2012.

If a student's application is accepted and that student fails to pay Mock Trial Academy the balance of his or her tuition by April 30, 2012, that student forfeits his or her spot in the program, as well as his or her tuition deposit.

If a student's application is not accepted, or if space is not available in the program, the \$250 tuition deposit will be returned.

Applicants have the option to pay the entire tuition upon application if they so desire. Under those circumstances, if the student's application is accepted, the student will be considered paid in full and his or her spot in the program will be reserved. If the student's application is not accepted, or if space is not available in the program, the entire tuition payment will be returned.

### **Cancellation and Refund Policy**

A tuition deposit in the amount of \$250 is required with each student's application. If a student gains admission into Mock Trial Academy and then decides to cancel, the students must do so in writing.

If Mock Trial Academy receives written notice of cancellation more than 60 days prior to the start date of the conference, all fees paid less \$250 will be refunded. If Mock Trial Academy receives written notice of cancellation less than 60 but more than 30 days prior to the start date of the conference, all fees paid less \$500 will be refunded. If Mock Trial Academy receives written notice of cancellation 30 days or less prior to the start date of the conference, or if a student departs while the conference is in session, there will be no refund. If a student's application is not accepted, or if there is no space in the conference, all monies paid shall be refunded in full.

### **Wait List**

If an applicant merits admission, but the program has already reached its capacity, the applicant will be placed on the Wait List. The tuition deposit paid by a wait-listed applicant will be returned to



applicant on or before May 31, 2012, unless the wait-listed applicant is enrolled off the wait list. If an applicant on the wait list is not accepted, all monies will be returned.

**Rules of Conduct**

The applicant agrees to follow all of Mock Trial Academy's Rules of Conduct throughout the conference, which include refraining from the use of tobacco, alcohol, or non-prescription controlled substances. At Mock Trial Academy's sole discretion, any infraction of Mock Trial Academy's Rules of Conduct may result in immediate dismissal, forfeiture of tuition and additional expense to return home. Mock Trial Academy's Rules of Conduct and Housing Agreement will be provided to the student prior to the start of the conference. The applicant and parent/guardian understand that the Rules of Conduct and Housing Agreement must be signed and returned in order to participate in Mock Trial Academy.

**Covenant and Release**

In consideration of being accepted as a participant in Mock Trial Academy, the applicant and parent/guardian each release, hold harmless and indemnify Mock Trial Academy, its officers, directors, agents, employees, partners, endorsers and affiliates from and for any claim, injury or other liability of any kind which is caused directly or indirectly by the applicant, or which results from or during the applicant's participation in Mock Trial Academy. The applicant and parent/guardian grant Mock Trial Academy permission to use any photographs, videos, statements or recordings of the student in connection with Mock Trial Academy for all lawful purposes without compensation.

**Signatures and Authorization**

The undersigned Parent/Guardian and Student swear and affirm that all statements made herein and documents attached are true and correct. Parent/Guardian and Student understand that this application is subject to the terms and conditions of Mock Trial Academy as set forth in the Enrollment Application.

Signature of Student (required): \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Guardian (required): \_\_\_\_\_ Date: \_\_\_\_\_