

Misty Meadows Herbal Center

Private Post-Secondary Career School
NH Dept. of Education License #MILE202
Lee, NH

STUDENT CONTRACT FOR PROGRAM YEAR 2022

1. I agree to attend class on all scheduled class dates and will do my best to be punctual.
2. I understand that I am required to complete five 5-hour Practicum days in addition to class dates, homework and any work/study agreement I may have been awarded by Misty Meadows Herbal Center with regard to this program.
3. I understand and agree that absences of more than two days (15 class hours) will render me ineligible for certification, without exception.
4. I understand and agree that all missed classes must be made up as outlined in the Student Handbook and that make up classes are scheduled at the convenience of the teacher and at a cost to me of \$60 per hour, payable in cash to the teacher at the time of the make-up class.
5. I understand and agree that Misty Meadows Herbal Center is a recreational smoke/drug/alcohol free zone, and I agree to abide by that rule. I will not partake in any of these items within the property limits of Misty Meadows.
6. I certify that I am physically able to participate fully in all aspects of the program, including sitting attentively in indoor or outdoor classes, gardening, gentle hiking up to 5 miles in field and forest, and working outdoors for periods of up to 5 hours rain or shine.
7. I certify that I am able to maintain a level of concentration for a minimum of 2 hours during lectures and hands-on workshops.
8. I agree to complete required homework and submit it for review within specified times to be set when assignments are given.
9. I agree to maintain valid, active Facebook and email accounts throughout the duration of the program and to notify Misty Meadows in writing (hardcopy or email) regarding changes to that address.
10. I understand and agree that the facilities at Misty Meadows Herbal Center are not handicapped accessible.
11. I understand and agree that I must provide all food needed for my personal use each class weekend, and that I will keep my food in my personal cooler unless preparing or eating it.
12. I understand and agree that I will be afforded kitchen privileges for preparing my food, and that I am expected to wash, wipe, and return to its proper place any and all items I might use.
13. I understand that Misty Meadows Herbal Center has a *Leave No Trace* policy and I therefore agree to remove any and all items brought onto the property by me, including my personal belongings and all trash I may generate. This does not include items provided to me by Misty Meadows as part of my class participation.
14. I agree to bring my own eating utensils.
15. I understand and agree that if at any time my progress, dedication or behavior is deemed unacceptable, I may be required to meet with the program director for counseling and resolution.
16. I understand and agree that the tuition cost of this program is \$2750 (before any discounts that may have been awarded), and that no refunds will be issued after April 1, 2022 for any reason.
17. I understand and agree that by signing this contract and submitting my registration I am agreeing to pay the full tuition no later than October 1, 2022 whether or not I complete the program. I further understand that I am legally responsible to pay the full tuition.
18. I understand and agree that giving false information on this contract or my violation of any of the terms of this contract may warrant my expulsion from the program, and that all monies paid will be forfeited and any unpaid balance is due upon notice of expulsion.

Student Signature

Date of Signature

Please Print Student Name