

Participant Agreement

Colonel Bill Thomas Yoga Scholarship

Center for Accelerated Language Acquisition



Preliminary Remarks: Please complete this Participant Agreement AFTER completing the online scholarship application (available at www.mtsu.edu/cala/scholarships.php). Once complete, scan and submit your signed Participant Agreement by email attachment to the Center for Accelerated Language Acquisition (CALA) by email at this address: acceleratedacquisition@gmail.com. Receipt of all submissions will be acknowledged by return email.

Please check one: I am a HIGH SCHOOL STUDENT I am a currently enrolled MTSU STUDENT

ATTESTATION

I, _____, do hereby attest to my understanding of and agreement to the following terms and conditions if awarded a Bill Thomas Yoga Scholarship to study yoga through CALA at Middle TN State University (MTSU):
First & Last Name of Applicant (please print)

- Online application. I have completed the online scholarship application as directed. I understand that this Participant Agreement is null and void without submission of said application. The information I have provided on the online application is true and complete to the best of my knowledge. I understand that failure to provide the requested information or providing false information may disqualify me from participation in the program.
- Program parameters/commitment. I understand that scholarship recipients will receive full tuition for one yoga course (a commitment of 2.0 to 10.0 hours depending on the course selected). Unless prohibited by emergency, I will arrive on time and attend the full class each day with my full participation for the duration of my commitment. My parent or legal guardian understands this commitment and approves of my participation (if under 18).
- Program feedback: I will complete any feedback surveys administered during the course. I understand that survey feedback and/or test scores will be shared with other parties for purposes of publicly and/or program evaluation.
- Media: I understand that my image may be photographed and/or filmed as a participant in this program for the purposes of documentation and/or publication of the event.
- Indemnification. I understand that these scholarships are limited I might not be selected for an award. I agree to hold harmless CALA, MTSU, and/or any of their employees or affiliates against any liability as a result of my application to or participation in this program.
- Yoga course registration. I understand that, if selected for an award, I will be required to complete a separate registration for the yoga course offered. This registration form will be sent by email to award winners and will solicit basic health information along with guidelines for successful participation in the course.

SIGNATURES (PLEASE SIGN IN BLUE INK)

Signature: Applicant

Date

Full Name: Applicant (please print)

Date of Birth (mm/dd/yyyy)

If the applicant is not yet 18 years of age, his or her Participant Agreement must be signed by a parent or legal guardian below

Signature: Applicant's parent or guardian

Date

Full name: Applicant's parent or guardian (please print)