



APPLICATION/ENROLLMENT FORM (EF) AY 2021-2022



School Name: _____ Are you a returning MESA student? Yes No

Last Name: _____ First Name: _____ M.I.: _____

CA SSID: _____ Grade Level: _____ Birthdate: ____/____/____

Student Email Address (Please use non-school e-mail if possible): _____

Permanent Address: _____

City: _____ State: _____ Zip: _____

Student Mobile Phone: (____)____-____ Parent or Guardian Mobile Phone: (____)____-____

Emergency Contact Name _____ Emergency Contact Number (____)____-____

*Pacific MESA Updates will be given via text message directly to student and parent mobile phones via text message

What is your T-Shirt Size? (This will be used for events throughout the year): _____

Gender: Female Male Trans Female/Trans Woman Trans Male/Trans Man
 Genderqueer/Gender Non-Conforming Different Identity Unavailable/Decline to State

Ethnicity (please write the corresponding number(s) into the space provided): _____

01 African American / Black	05 Filipino/Filipino-American	09 Pacific Islander (includes Micronesian, Polynesian, other Pacific Islanders)	13 Other Spanish-American/Latinx (includes Cuban, Puerto Rican, Central and South American)
02 American-Indian/Alaskan Native	06 Japanese/Japanese-American	10 Vietnamese/Vietnamese-American	14 More Than One
03 Chinese/Chinese-American	07 Korean/Korean-American	11 White/Southwest Asian and North African	15 Other (not listed above)
04 East Indian/Pakistani	08 Mexican/Mexican-American/Chicanx	12 Other Asian (Not including Middle Eastern)	16 Decline to State/Don't Know

Is a language other than English spoken regularly in your home? No Yes If yes, specify _____

Summer Programs Participated in Past Summer (please check all that apply):

- 1. MESA Summer Program
- 2. Summer Advancement Academy (SAA)
- 3. Summer Job
- 4. Other Program, please specify _____

Other Academic Programs Participated (please check all that apply):

- 1. Puente
- 4. Upward Bound
- 2. UC Early Academic Outreach
- 5. AVID
- 3. CSU Early Outreach
- 6. COSMOS

Primary Career Interest (please check one):

- 1. Engineering
- 5. Technical (beautician, electrician, carpenter, mechanic, army/marine etc.)
- 9. Health Profession
- 2. Computer Science
- 6. Physical Science (chemistry, physics, astronomy, geology etc.)
- 10. I don't know
- 3. Business
- 7. Life Science (biology, agriculture, ecology etc.)
- 11. Other Non-Math Based Careers (politics, art, history, language etc.)
- 4. Teaching
- 8. Other Math Base Career (mathematics, data science, statistics, economy etc.)

1. Parent/Guardian Name: _____

2. Parent/Guardian Name: _____

Highest level of education achieved by each of your parents or guardians? (please write the corresponding number in the applicable box):

Parent 1

Parent 2

- | | |
|--------------------------------------|---------------------------------|
| 1. Did Not Graduate from High School | 6. Beyond 4-year college degree |
| 2. High School Graduate | 7. M.S./M.A./M.B.A./Ph.D degree |
| 3. Some College or University | 8. Don't know |
| 4. Community college degree | |
| 5. 4-year college degree | |

What type of work have your parents or guardians typically done over the past years or prior to retiring? (please write the corresponding number into the boxes):

Parent 1

Parent 2

- | | |
|------------------------------|--------------------|
| 1. Engineer | 7. Factory worker |
| 2. Computer Scientist | 8. Farm worker |
| 3. Other Professional | 9. General worker |
| 4. Manager/Supervisor | 10. Never employed |
| 5. Sales/Clerical | 11. Don't know |
| 6. Skilled technician, trade | |



Assumption of Risk, Release of Claims and Hold Harmless Agreement

Program	University of the Pacific MESA Program
Program Dates	August 1, 2021-July 31, 2022
Location of Events	Online, School, University of Pacific, field trips and regional events

The parties to this Agreement are:

Name of Child Participating in MESA:	Participant's custodial parent or legal guardian:
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Participant acknowledges that he/she has read this Assumption of Risk, Release of Claims, Indemnification and Hold Harmless Agreement (below), understands its meaning and effect, and agrees to be bound by its terms.

Date:
Signature of Custodial Parent or Legal Guardian (if Participant is Under 18):
Name of Child's School:

Assumption of Risk, Release of Claims, Indemnification and Hold Harmless Agreement

If Participant is under 18, all referred to hereafter jointly and severally as "Participant". The University of the Pacific, its Board of Regents, officers, trustees, faculty, agents, representatives, volunteers, students and employees (collectively referred to hereafter as "Pacific").

Assumption of Risk. Participant is a voluntary participant in MESA activities. Participant understands and agrees that MESA and any related activities may be dangerous, may involve travel, and that neither MESA nor Pacific can guarantee the safety of Participant.

Participant is responsible for researching and evaluating the risks he/she may face and is responsible for his/her actions. Any activities in which Participant may take part, whether as a component of MESA or separate from it, have been undertaken with Participant's understanding and acceptance of any and all risks involved, which include but are not limited to physical or psychological injury, pain, suffering, disfigurement, temporary or permanent disability, economic or emotional loss, property loss or damage, loss of income or career opportunities, and/or death. Participant understands that these injuries or outcomes may arise from his/her own or others' actions, inaction, or negligence; conditions related to travel; or the condition of the location where the MESA activity is taking place. Nonetheless, Participant assumes all related risks, both known or unknown, whether or not listed above, of his/her participation in MESA, including travel to, from and during MESA events.

Physical Condition and Insurance. Participant attests that she/he is physically and mentally capable of participating and has no known health or other restrictions that might jeopardize her/his safety or health or the safety or health of others during their participation in MESA. Participant gives permission for Pacific or its representative to provide immediate and reasonable emergency care should it be required. Participant agrees to hold harmless and indemnify Pacific from any claims, causes of action, damages and/or liabilities, arising out of or resulting from said medical treatment or emergency care.

Participant agrees to be solely responsible for payment in full of all costs of medical or emergency care she/he may receive.

Student Records. I authorize Pacific to have access to, make and receive copies of my child's academic school records through the completion of the 12th grade. Participant understands that these records will be kept confidential and will be used to: a) monitor my child's academic progress; and b) determine when additional academic support services are needed.



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I understand that information from my child's academic records will be disclosed to designated representatives of colleges and universities so they may determine my child's eligibility for admission at their institutions, his/her need for special services, and for general use in planning outreach and recruitment activities.

Video Release. Participant agrees that Pacific may record, edit, use, reproduce, publish and distribute by way of any and all media and transmission, the visual and/or audio likeness of Participant and other commentaries, information, and materials the Participant may provide in connection with MESA, which includes, without limitation, Participant's name, biographical information, recorded voice, likeness, commentaries, presentation materials, and/or performance at MESA events. Pacific and the California MESA Program are further granted permission to use such materials for educational, fund-raising, promotional or other purposes worldwide and in perpetuity Participant agrees that Pacific will be held harmless from any liability that may arise regarding the production, use, and distribution of such materials as described herein, and Pacific is hereby released from any claims relating to the rights granted above.

Online Content. By registering for this activity or program, you agree that you are the parent or guardian of the participant(s), who will be under your supervision throughout the activity or program; and you are fully aware of the risks connected with participating in an online activity or program and, knowing those risks, choose to have your child or children participate. The risks of an online activity or program include, but are not limited to, data mining, phishing, viruses, malware, data breach of online information, cyberbullying, exploitation, cyber stalking, online grooming, cyber predators, and image replication.

Waiver and Release of Claims. In consideration of being accepted into and/or participating in MESA, Participant agrees to and hereby does, for Participant and on behalf of Participant's heirs, executors, administrators, employers, agents, representatives, insurers, and attorneys, release and discharge Pacific of and from any and all claims which may arise from any cause whatsoever, including claims arising from any negligent act or omission by Pacific or others. Participant further releases and discharges Pacific from liability for any accident, illness, injury, loss or damage to personal property, or any other consequences, arising or resulting directly or indirectly from Participant's participation in MESA.

Indemnification and Hold Harmless. Participant hereby agrees to indemnify, defend, and hold harmless Pacific from any and all claims of injury, loss or liability whatsoever including reasonable attorneys' fees and/or any other associated costs, that may arise as a result of his/her participation in MESA. If Pacific incurs any of these types of expenses, Participant agrees to reimburse Pacific.

To the extent Participant engages in activities that are not part of MESA and from which Participant may sustain personal injury or other damage to him/herself or property, or cause others to be injured or sustain other damage including damage to their property, Participant understands that neither Pacific, nor any of its employees, officers, directors, volunteers, and agents will be held responsible regardless of cause or fault.

Adherence to Standards. Participant understands and agrees to abide by all Pacific policies, rules, and regulations applicable to MESA.

Severability. It is understood and agreed that, if any provision of this Agreement or the application thereof is held invalid, the invalidity shall not affect other provisions or applications of this Agreement which can be given effect without the invalid provisions or applications. To this end, the provisions of this Agreement are declared severable.

Governing Law and Venue. This agreement shall be construed in accordance with, and governed by, the laws of the State of California. The venue for any action arising out of this Agreement shall be the County of San Joaquin, State of California. The parties agree to submit to jurisdiction in the State Courts, San Joaquin County, California.

Construction and Scope of Agreement. The language of all parts of this Agreement shall in all cases be construed as a whole, according to its fair meaning, and not strictly for or against any party. This Agreement is the only, sole, entire, and complete agreement of the parties relating in any way to the subject matter hereof. No statements, promises, or representations have been made by any party to any other, or relied upon, and no consideration has been offered or promised, other than as may be expressly provided herein. This Assumption of Risk, Release of Claims, Indemnification, and Hold Harmless and Agreement supersedes any earlier written or oral understandings or agreements between the parties.



Assumption of Risk, Release of Claims and Hold Harmless Agreement

MESA Calendar 2021-2022 (Please Keep This)

Key: **Online Events** In-person events

<i>July</i>	<i>August</i>	<i>September</i>
	28 th Summer Scavenger Hunt (Family Event)	
<i>October</i>	<i>November</i>	<i>December</i>
1 st Catapult Event (Families Welcome) 18 th -22 nd Online Quiz Bowl 21 st Statewide College Night (HS only) 29th Fall Enrollment deadline TBD Expanding Your Horizons	5 th Pacific STEM Day (HS only) 12 th Engineering Hackathon and Quiz Bowl Finals	8 th Eighth Grade Night (family event) 17th T-Shirt designs due
<i>January</i>	<i>February</i>	<i>March</i>
<i>Engineering Workshops</i>	17 th Online Escape Room	4 th NEDC Technical Interview and Pitch 5 th Virtual MESA Day (Math Escape, Coding) 12 th Pacific MESA Day 26 th H ₂ O Hackathon
<i>April</i>	<i>May</i>	<i>Summer</i>
15 th Shadow Day 17 th Regionals TBD	14 th Spring Challenge (families welcome) 19 th End of the year banquet (family event) <i>Great America Field Trip for student leaders</i>	June 10-17 -DS ⁴ Summer Program

Above is the tentative calendar for the 2021-2022 school year. Dates are subject to change and will be updated on the www.pacific-mesa.com website upon adjustment. This agreement serves as a permission slip for all of the events listed above. Individual districts, schools, and/or classes may require additional permission slips.

Medical Information, Consent for Emergency Medical Treatment &
Emergency Contact Information Form
THIS FORM IS OPTIONAL (recommended for children with medical conditions)

Participant Name _____

Medical Insurance

Is the participant covered by medical/hospital insurance? Yes No
If so, list the policy/group number: _____

Carrier Name _____

Medical Information

Primary Care Physician _____

Phone _____

YES **NO** 1. Does your son/daughter take any medicine regularly? If yes, please give details.

YES **NO** 2. Is your son/daughter allergic or sensitive to medicines and/or inoculations, asthma, hay fever,
 insect bites, poison oak, any foods, etc.? If yes, please give details and list medications.

Please specify any other information that would be helpful for the adults supervising the activity, such as a significant recent illness, accident, health history, etc.:

<u>Contact persons if parent/guardian can't be reached in case of an emergency:</u>		
Name:	Home/Work Phone:	Cell Phone:
Name:	Home/Work Phone:	Cell Phone:

Consent for Emergency Medical Treatment

I hereby give consent to the University of the Pacific to obtain all emergency medical care under whatever conditions are necessary to preserve the life, limb or wellbeing of the Participant named above.

Custodial Parent/Legal Guardian Signature _____ **Date** _____

Parent/Guardian Name Printed _____