

# BEHAVIOR/GUIDELINES FOR STUDENTS/MINORS



This form is to be read, initials added by student and signed by the student/minor. It should also be signed by a parent or guardian. This form is an agreement to adhere to the standards, guidelines and policies of St. Pius X - St. Matthias Academy as guests of the retreat center/location where the retreat will be hosted. Students are expected to treat with the utmost respect all: property, guests, employees, teachers, chaperones and other students/themselves.

1. **Respect for Property:** Property at retreat location, indoor and outdoor areas, and other areas should not be damaged, marked, or vandalized in any way. Personal property should not be damaged or borrowed without permission or taken from the premises at any time.

Please Initial \_\_\_\_\_

2. **Respect for the Law:** Students are not to consume or be in possession of non-prescription drugs, alcohol, tobacco or other substances known to be illegal. Physical abuse, foul language, bullying, and fighting of any kind will not be tolerated. Any incidents as mentioned above or any items deemed illegal or dangerous will be cause for immediate removal (*parent will be contacted and will be expected to arrive at the site upon request of staff/employee*).

Please Initial \_\_\_\_\_

3. **Cooperation and Participation:** Attending a retreat with PMA is a personal and meaningful experience for all in attendance: Every student is invited to fully participate and benefit fully from the experience being offered - We expect that all participants have respect and cooperate fully with the directions given by staff, chaperones and leaders. Students should not negatively interfere with the experience of others during the retreat.

Please Initial \_\_\_\_\_

4. **Cooperation with School Policy:** *I Understand all school policies, code of conduct, disciplinary guidelines apply to the retreat experience. PMA faculty and staff will determine what appropriate action will be taken to address any and all students that are not cooperating with the behavior contract and PMA school handbook policies.*

Please Initial \_\_\_\_\_

I, \_\_\_\_\_ have read and understand these guidelines: YES \_\_\_\_\_ NO \_\_\_\_\_  
(Student Name)

Student/Participant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Parent or Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_