



Access Arts High School Internship Agreement: Summer Camp 2022

By signing this agreement, I, _____ (intern full name), agree to act as an intern for Access Arts on the following dates and times:

Week: _____ Shift (circle one) : AM (9:00-1:00)
PM (1:00-5:00)

Week: _____ Shift (circle one) : AM (9:00-1:00)
PM (1:00-5:00)

For the week/s listed above, I agree to attend each day, Monday-Friday, for the selected shift. I will attend the same shift each day for the entire week/s. If I am unable to attend for any reason, I know it is my responsibility to contact Lisa Franko, the Youth Program Coordinator, as soon as possible.

I understand that in return for my service I am entitled to attend one week of Access Arts' H.S. Summer Camp at no cost. I understand that if I attend the H.S. Camp and fail to serve the above week/s (unless extenuating circumstances arise) you will be billed for the week of camp attended.

Intern Signature: _____ Date: _____

I have read and understand the expectations listed above for my child as an intern at Access Arts.

Parent/Guardian Signature: _____ Date: _____