

SPARK ACADEMY CONDUCT CONTRACT

Date: September 16, 2026

Location: Pickle n' Pins, 6930 Veterans Memorial Boulevard | Metairie, LA | 70003

Purpose:

This contract outlines the expectations for behavior and conduct during the Toronto workshop. By signing this contract, participants agree to maintain a respectful, inclusive, and professional environment.

Code of Conduct

- **Respect for Others**
Treat all participants, facilitators, and staff with respect and courtesy.
Listen actively and allow others to express their ideas without interruption.
Avoid engaging in discriminatory, offensive, or inappropriate language or behavior.
- **Punctuality and Attendance**
Arrive on time for all sessions and remain for the entire duration.
Notify the workshop coordinator if you must leave early or miss any sessions.
- **Participation**
Engage fully in all activities, discussions, and exercises.
Avoid distractions, such as excessive phone use, during sessions.
Share ideas constructively and collaborate with peers.
- **Professionalism**
Dress appropriately for a professional learning environment.
Refrain from disruptive behavior, including talking over others or engaging in side conversations.
- **Use of Materials**
Respect workshop materials and equipment.
Do not distribute or reproduce materials without permission.
- **Confidentiality**
Respect the privacy of others by not sharing personal stories or sensitive information discussed during the workshop.
- **Safety**
Follow all safety guidelines provided by the workshop organizers.
Notify a facilitator or staff member immediately if you observe unsafe conditions or behavior.
- **Consequences for Violations**

Failure to adhere to the above expectations may result in

- A verbal warning.
- Removal from specific sessions.
- Reporting of the incident to your school/parent
- Immediate dismissal from the workshop without a refund.

Acknowledgment and Agreement

By signing below, I acknowledge that I have read, understood, and agree to abide by the Code of Conduct outlined above. I understand that failure to comply may result in disciplinary actions, including removal from the workshop.

Name (Printed): _____ School: _____

Emergency Contact Name and Number: _____

Signature: _____ Date: _____

MODEL RELEASE FORM

For Participants of the New Orleans Spark Academy Workshop

Dates: September 16, 2026

Location: Pickle n' Pins, 6930 Veterans Memorial Boulevard | Metairie, LA | 70003

Participant's Name (Student): _____

Parent/Guardian Name (if under 18): _____

Permission and Release

By signing this form, I, the undersigned, hereby grant Friesens Corporation and its representatives, employees, contractors, and assigns (collectively referred to as "Friesens") permission to take photographs and video recordings of my child during the Spark Academy workshop. I understand and agree that these materials may be used for the following purposes:

- Marketing and promotional materials for the Company.
- Social media posts and digital content (e.g., Facebook, Instagram, Twitter, YouTube).
- Training materials or educational resources.
- Website content and advertisements.

I understand that:

- The images and videos may be edited, altered, or combined with other content.
- My child's name will not be used in connection with any images or videos without additional written consent.
- I will not receive monetary compensation for the use of these images or videos.
- The materials will be the sole property of the Company.

Release of Liability

I release and hold harmless Friesens Corporation and all associated parties from any claims, demands, or causes of action that may arise related to the use of these materials, including but not limited to claims for libel, invasion of privacy, or copyright infringement.

Acknowledgment and Agreement

I confirm that I am the parent or legal guardian of the minor listed above, and I have the authority to provide this release. I have read and understand this release form and voluntarily agree to its terms.

Parent/Guardian Name (Printed): _____

Parent/Guardian Signature: _____

Date: _____

Phone Number: _____

Email Address: _____

Emergency Contact Name and Phone Number: _____

Optional: Opt-Out Clause

If you do not want your child to be included in photographs or videos, please check this box:

I do not grant permission for my child to be photographed or filmed during the workshop.