

SCRIPPS RANCH HIGH SCHOOL GRAD NITE 2019 - PERMISSION SLIP

Event: June 8, 2019 8:00AM to June 9, 2019 5:00AM

(PLEASE PRINT & BRING COMPLETED FORM TO PURCHASE YOUR TICKET)

***BUS WILL BE ASSIGNED AT PURCHASE TIME, SO BE SURE TO BUY YOUR TICKET AT THE SAME TIME AS THOSE YOU WANT TO RIDE THE BUS WITH**

Graduate Name (please print) _____

Parent/Guardian Name (please print) _____

RELEASE OF ALL CLAIMS/HOLD HARMLESS & INDEMNITY AGREEMENT

WE HAVE READ THE SCRIPPS RANCH HIGH SCHOOL GRAD NIGHT POLICIES AND PROVISIONS AND AGREE TO BEHAVIOR CONSISTENT WITH THEM. WE HEREBY AGREE TO RELEASE THE SAN DIEGO UNIFIED SCHOOL DISTRICT (SDUSD), SCRIPPS RANCH HIGH SCHOOL, SRHS FOUNDATION, AND THE SRHS GRAD NITE 2019 COMMITTEE/CHAPERONES FROM ANY AND ALL CLAIMS, LIABILITIES, ACTIONS, AND CAUSES OF ANY KIND. WE HEREBY AGREE TO HOLD HARMLESS AND INDEMNIFY SDUSD, SCRIPPS RANCH HIGH SCHOOL, SRHS FOUNDATION, AND THE SRHS GRAD NITE 2019 COMMITTEE/CHAPERONES FROM ANY OF THE ABOVE ARISING OUT OF THE ABOVE NAMED CHILD'S TRAVELING TO, ATTENDING, PARTICIPATING IN, AND RETURNING FROM ANY GRAD NITE ACTIVITY. WE RECOGNIZE THE ADVANTAGES OF GRAD NITE AND ITS PURPOSE OF SAVING LIVES BY PROVIDING AN ALCOHOL AND DRUG FREE CELEBRATION ENVIRONMENT FOR OUR GRADUATING SENIORS. WITH THIS UNDERSTANDING, WE HEREBY VOLUNTARILY PROVIDE SDUSD, SCRIPPS RANCH HIGH SCHOOL, THE SRHS FOUNDATION, AND GRAD NITE COMMITTEE WITH THIS RELEASE OF ALL CLAIMS/HOLD HARMLESS AND INDEMNITY AGREEMENT.

Parent/Guardian Signature _____ Date _____

GRADUATE AGREEMENT

I HAVE READ AND UNDERSTAND THE POLICIES AND PROVISIONS OF MY PARTICIPATION IN GRAD NITE ON SATURDAY, JUNE 8, 2019. I MUST BE DROPPED OFF BETWEEN 8:15 AM and 8:45 AM FOR CHECK IN AT SCRIPPS RANCH HIGH SCHOOL AND WILL BE BUSED TO THE DISNEYLAND RESORT. I AGREE NOT TO CARRY ONTO THE BUS OR VENUE PREMISES ANY SUBSTANCES, SUCH AS, TOBACCO, DRUGS, ALCOHOL, OR WEAPONS, WHICH WILL AFFECT MY BEHAVIOR AND/OR WILL HAVE A DETRIMENTAL EFFECT ON MY OR OTHER'S SAFETY AND/OR ENJOYMENT OF THE EVENING. I UNDERSTAND THAT IF I ARRIVE TO THE BUSSING LOCATION UNDER THE INFLUENCE OF ANY SUBSTANCE, SUCH AS DRUGS OR ALCHOHOL, I WILL NOT BE ALLOWED TO PARTICIPATE IN GRAD NITE. I ALSO UNDERSTAND THAT, ONCE I ENTER THE PARTY, I MAY NOT LEAVE UNTIL 2:00AM ON MY DESIGNATED BUS, UNLESS PRIOR ARRANGEMENTS HAVE BEEN MADE IN ACCORDANCE WITH THE POLICIES AND PROVISIONS, AND I AM ACCOMPANIED BY MY PARENT/GUARDIAN. **I AGREE TO THESE PROVISIONS AND AM LOOKING FORWARD TO A SAFE AND MEMORABLE GRAD NIGHT CELEBRATION!**

SRHS Graduate Signature _____ Date _____

PARENT/GUARDIAN AGREEMENT

I GIVE PERMISSION FOR THE ABOVE NAMED GRADUATE TO PARTICIPATE IN THE GRAD NITE CELEBRATION AT THE CALIFORNIA ADVENTURE PARK LOCATED AT THE DISNEYLAND RESORT IN ANAHEIM CAIFORNIA. **I UNDERSTAND THAT I AM RESPONSIBLE FOR DROPPING OFF AND PICKING UP THE GRADUATE AT SCRIPPS RANCH HIGH SCHOOL AT THE DESIGNATED TIMES (JUNE 8 AT 8:00-8:45AM & JUNE 9, AT APPROXIMATELY 5:00AM).**

Parent/Guardian Signature _____ Date _____

Parent Phone# (during Grad Night) _____

Alt. Emergency Phone# (REQUIRED) _____

Physician's Name _____ Phone# _____

Graduate's allergies or specific medical conditions you would like us to know about in case of an Emergency

*SRHS GRAD NITE 2019 IS A COMPLETELY VOLUNTARY EVENT SPONSORED
BY THE SRHS FOUNDATION GRAD NITE 2019 COMMITTEE
FOR THE SAFETY AND ENJOYMENT OF THE GRADUATING SENIORS*

STUDENTS WILL NOT BE PERMITTED TO PURCHASE TICKETS/ATTEND THE EVENT UNLESS SIGNED CONSENT FORMS ARE RECEIVED