Permission Form

Herndon High School - All Night Grad Party 2027 - June 2 - 3, 2027

A completed form and payment are required to attend the event - please print legibly

Date you are submitting permission form: _____

Graduating Senior's Name: _____

Student's Email: _____

Address: _____

Legal Guardian's Name & Email:

_____

You will receive an email confirming your reservation. Please keep a copy of this form for your own records. No actual ticket will be issued, but a master reservation list will be used to check students in. Please check the correct ticket price for the current date and check any other boxes you would like to purchase.

Please see payment information and requirements at the top of this form or make online payment at https://herndonang.org/tickets.

Payment Method (Check one): ___ Online payment __ Sending check with ticket form

$☐ **$65 –** Price until December 31, 2026
$☐ **$75 –** Price from January 1, 2027 to March 31, 2027
$☐ **$85 -** Price from April 1 to June 1, 2027
$☐ **$90 -** Price at the Door
$☐ **FREE –** if eligible for free or reduced lunch obtain signature from Ms. Gibson:
_____
$☐ **$10 –** Raffle Ticket for Premium Reserved Graduation Seating.
___ raffle tickets @ $10 each
$☐ **$40 –** Pack of 5 Raffle Tickets for Premium Reserved Graduation Seating (save $10)
$____ Additional donation as ticket scholarship for other students
$____ Additional donation to the ANG Party

$____ **Total Enclosed**

More information about ANG can be found at ***http://www.herndonang.org***
Or email HerndonHighSchoolANG@gmail.com

Parental Authorization and Acknowledgement of Risk

I understand that participation in this activity involves public property and that neither the HHS 2027 All Night Graduation Party Committee nor its parent volunteers will have any responsibility for the condition of use of this property. I have been made aware of the purpose of this activity and understand that there are a variety of events in which my child may choose to participate.

I agree that my child is physically able to safely engage in these events. Also, I have been given the opportunity to have my questions concerning this event answered to my satisfaction. I have provided the reach number (listed below) for the ANG Committee to use to notify me should my child fail to check in before 11:00 PM on June 2, 2027 or request to leave the party before 2:00 AM on June 3, 2027.

I will not hold the Herndon High School PTSA liable for any accident in which I/my child has contributed in a negligent manner toward injury. Should an at fault accident occur, mine/my child's own medical insurance will be the primary coverage.

Parent's/Guardian's Signature: _____
Date: _____

Parent's/Guardian's Phone Number:_____

Student Acknowledgement of Expectations and Rules

I understand that this event will take place on public property and that I am responsible for my behavior and any damage I create on the property. I have been made aware of the purpose of this activity and understand that there are a variety of events in which my child may choose to participate.

I have read the rules on Page 1 of the Permission form and understand the expectations of the event. I agree to follow these rules as they are written and to represent myself well at this event. I understand I will be held responsible for my actions at the event.

Student's Signature: _____
Date: _____