

Important Senior Graduation Party Information

- Graduation ceremony is June 4th, 5:30pm at Memorial Coliseum
- Students will be transported from the coliseum to the Grad Night Party on chartered buses after the ceremony. Seniors will be returned to LHS at approximately 5:00am the following morning.
- Students should leave all electronics and personal belongings with parents or at home. Students are encouraged to place a swimsuit and towel in a labeled plastic bag in the main office before June 1st in order to have them available at the venue for swimming.
- This permission slip will need to be completed and returned for students to attend the party.
- The cost of the party is \$100 per student. Checks are payable to "Friends of Lincoln" and should be turned in to the "Grad Party Box" in the main office. Please contact your student's counselor if you need assistance with payment. **ALL STUDENTS ARE ENCOURAGED TO ATTEND REGARDLESS OF ABILITY TO PAY.**

Please provide the following contact information in case of an emergency:

Parent Names: _____

Parent Email(s): _____

Parent Phone #'s: _____

MEDICAL INFO

Student Name: _____ Date of birth: _____

Address: _____

Emergency contact (other than parent): _____

Phone: _____ Relationship to student: _____

Name of Physician: _____ Phone: _____

Medications, Chronic conditions, allergies: _____

Medical Insurance Provider: _____

Policy Number: _____ Group Number: _____

PLEASE COMPLETE BOTH SIDES OF THIS FORM

PERMISSION FORM FOR ALL NIGHT PARTY

CONSENT TO MEDICAL CARE AND TREATMENT

If I, _____ cannot be reached in case of any emergency, I authorize all medical, surgical, diagnostic and hospital procedures as may be performed or prescribed by a treating physician for _____

Date: _____

Signature of Parent/Guardian: _____

We, the Parent Planning Committee for the All-Night Grad Party, Lincoln class of 2017 are dedicated to producing an alcohol and drug-free event. If a student engages in any inappropriate behavior their parents will be called immediately to pick up their son/daughter. If applicable, no refunds will be granted under these circumstances.

I hereby give permission for _____ to attend the Senior Graduation Night Party on June 4th, 2017.

The parents of _____ acknowledge this Graduation Night Party for the LHS Class of 2017 is not a school-sponsored event. We agree to follow the rules established by the Parent Planning Committee which is comprised of parents who have organized the event. We assume all risks associated with the attendance and participation at the event and agree to hold harmless the school district, FOL, vendors, host venue and each member of the 2017 Parent Planning Committee from any and all liability claims that may occur.

Student signature: _____ Date: _____

Parent signature: _____ Date: _____

Parent signature: _____ Date: _____

For more information please contact April Paris, akparis@comcast.net or Samantha Fishman, samanthapdx@gmail.com.

PLEASE COMPLETE BOTH SIDES OF THIS FORM

