



Wilson High School

PTA Grad Night 2018

Information and Registration Forms

PTA Grad Night 2018 is a drug, alcohol, tobacco and weapon free, all night celebration for the graduates of Wilson High School. PTA Grad Night 2018 begins right after the **Commencement Ceremony on June 6th, 2018**. The event is a wonderful night of fun activities, prizes, great food, and memories our students will keep for years to come. The graduates will leave on buses directly from graduation to a secret location. Graduates will be returned to Wilson High School no later than 6 am on June 7th.

Save Money, Register Early!

All students need to sign up for the event to attend

Ticket Prices:

Sign Up by October 1st, tickets for the event are \$95. *Register by Oct 1st and receive a raffle to win a fun prize!!!

After October 1st, 2017 \$100.00

After February 2, 2018 \$125.00

Scholarships are available- students must fill out a registration forms to apply

It is our goal that all graduates of the WHS Class of 2018 attend this event – requests for scholarships may be made on the **Permission to Attend** form.

***Class of 2018 T-Shirt** is included with your registration fee! Sizes available S M L XL XXL

IMPORTANT - We would like all forms/payment returned by January 31, 2018.

To register, please complete the Permission to Attend/Payment, Medical Release, Facility Waiver and Parent Volunteer forms. Then attach your payment (checks may be made out to “WHS PTA Grad Night”). Mail to: WHS PTA Grad Night 2018 Committee, 1151 SW Vermont Street, Portland, OR 97219 or deposit in the locked Grad Night Box on the counter in the WHS Office.

PTA Grad Night 2018 Committee next meeting will be in September – date and time to be announced via email and the Wilson Bulletin. Everyone who would like to participate in planning or volunteering for PTA Grad Night 2018 is welcome to attend!

2018 PTA Wilson HS Grad Night Chairs

Melissa Rubin dmjlrubin@yahoo.com and Julie Jacobsen julie@berntlaw.com

Forms check list:

_____ Mark T-shirt size on registration form

_____ Permission to Attend Form

_____ Medical Release Form

_____ Facility Waiver Form

_____ Parent Volunteer Form

_____ Payment: Checks made out to “WHS PTA Grad Night”/Cash payments put in the locked Grad Night box in the office. You will receive an email confirmation that forms and payment have been received.



Wilson High School PTA Grad Night 2018

Permission to Attend/Payment Form

Student Name: _____

Last

First

Wilson High School 2018 PTA Grad Night on June 6-7, 2018

The PTA Grad Night 2018 Parent Committee representing the class of 2018 graduates from Wilson High School, is proud to present a safe, drug, and weapon-free environment in which our youth can celebrate the culmination of their twelve years of compulsory education. We are dedicated to providing a fun, memorable event, full of activity and entertainment that all of the graduating seniors will enjoy. We promise to take whatever measures necessary to ensure that the participants in the Grad Night 2018 event are free to enjoy themselves, without threat from antagonistic conduct of fellow graduates or chaperones, especially stemming from the use of controlled substances.

Student Participation Pledge

As a participant in the Wilson High School PTA Grad Night 2018 event on June 6-7, 2018, I pledge to adhere to the following rules:

- No disrespectful words/deeds or sexually intimate or lewd behavior toward graduates, chaperones, or venue employees.
- No alcohol, drugs, or controlled substances of any kind used prior to, or during the evening.
- No tobacco products of any kind allowed on the participants, buses, or at the celebration facility.
- No weapons of any kind allowed on participants, buses, or celebration facility.

Any of the above behaviors will cause my immediate removal from the bus or facility, and my parents/guardians will be called to pick me up.

Student Signature: _____ Date: _____

Parent/Guardian Agreement

We/I understand that this PTA Grad Night 2018 event for Wilson High School graduates is not a school-sponsored activity, and that the School District assumes no legal liability associated with this event. We/I agree to hold the School District and all members of the PTA Grad Night 2018 Parent Committee harmless from any and all liability claims of any nature, which may arise in connection with this event. We/I agree to pick up my child from the party if I am notified that he/she is misbehaving or is ill.

We/I hereby give permission for _____ to attend the PTA Grad Night event on June 6, 2018. (student's name)

Parent/Guardian Signature: _____ Date: _____

Parent Email: _____ Cell Phone: _____

Print Parent/Guardian name(s): _____

Phone No. 1: _____ Phone No. 2: _____

___ We/I have included my student's \$95.00 payment here (before October 1st, 2017)

___ We/I have included my student's \$100.00 payment here (after October 1st, 2017)

___ We/I have included my student's \$125.00 payment here (after February 2nd, 2018)

___ We/I request a scholarship for this event. We/I can pay \$ _____ (optional)

___ We/I would like to make a tax-deductible donation in the amount of \$ _____ to be used on scholarships and to reduce fundraising for the event.

Class of 2018 T-Shirt is included with your registration fee Circle shirt size: S M L XL XXL

Mail form & Payment to: WHS PTA Grad Night Party, 1151 SW Vermont Street, Portland, Oregon 97219

Or place it in the PTA Grad Night Lock Box on the counter at the Wilson High School office.



Wilson High School PTA Grad Night 2018

Medical Information & Release Form

Student Name: Last _____ First _____

Please fill in all blanks. Put "NA" if an item is non-applicable. Parents/guardians may be called to verify certain information, or if certain items are left blank. Because this form may contain certain protected health information, only the Grad Night Party Medical Team will have access to these forms before and during the party.

Parent/Guardian Name(s): _____

Address: _____

Day Phone: _____ Cell Phone: _____

Parent/Guardian Email (Mandatory): _____

Student lives at this address? Yes No Student birthday: ____/____/____ Male Female

Student's Health Care Provider's Name: _____

Health Care provider's phone number: _____

Health Insurance Information: _____

(Insurance provider for insured party, Policy/ID/Group numbers)

Date of last tetanus shot: _____

(Shot should be within the last 10 years; check with your child's health care provider if you are unsure.)

____ Check here if you child does not receive routine immunizations.

Chronic illnesses or health concerns: _____

Allergies: _____

Medications needed by student: _____

In the event that your child is injured or becomes ill at the party, the First Aid team will call parents/guardians in the order listed below. Please list at least two emergency contact phone numbers (including one that is not a parent/guardian) that will be available during the night and early morning of the party:

Name	Relationship to student	Number
_____	_____	_____
_____	_____	_____

CONSENT TO MEDICAL CARE AND TREATMENT

In the event of a medical emergency, I authorize all medical, surgical, diagnostic, and hospital procedures deemed necessary to be performed or prescribed by a treating health care provider for _____, if I cannot be reached.

Name of Student: _____

SIGNATURE of Parent/Guardian: _____ **Date:** _____

Print Parent/guardian name: _____

Mail form to: WHS PTA Grad Night Party, 1151 SW Vermont Street, Portland, Oregon 97219
 This form may also be dropped off in a sealed envelope clearly marked "PTA Grad Night Medical Team" in the locked Grad Night Box on the counter in the main office at Wilson High School.



Wilson High School PTA Grad Night 2018

Facility Waiver

Student Name: Last _____ First _____

In this waiver the term "facility" is defined as the hosting facility where the grad night event will take place. The participant understands that the name of the facility has been withheld at the request of **Wilson High School** in order to keep the location a surprise.

"The undersigned understands and agrees that during the visit he/she in attending said facility and using the facilities and equipment in participating in said event day/program, does so at his/her own risk. The facility shall not be liable for any damages arising from personal injuries, disability, death, or loss of damage to person or property sustained in, on, or about the premises of said facility, and does hereby fully and forever release and discharge the center, owners and employees from any action or cause of action present or future whether the same be known or unknown anticipated or unanticipated resulting from or arising out of the said facility or the facilities and equipment thereof."

Any use or possession of drugs, alcohol or tobacco by any participant will result in an immediate ban from any further activity at the facility. The parents of the participant will be called and required to pick them up immediately. If a parent does not pick up the participant the Police Department will be notified.

Any use of the facility other than the designated areas is strictly prohibited; areas will be clearly marked and communicated.

Loud, offensive, abusive, profane, or bothersome behavior to fellow participants, chaperones and/or staff will not be tolerated, this includes fighting. Participants are expected to treat fellow students, chaperones and staff in a respectful and courteous manner at all times.

The facility reserves the right to remove anyone from the facility at anytime for any reason.

Student Section:

By signing below I agree to adhere to the above stated conditions and any violation of the expectations set forth by the facility will result in my expulsion from the 2018 PTA Grad party:

Student Signature

Date

Parent/Legal Guardian Section:

By signing below I agree to the above stated conditions set forth by the facility:

Parent Signature

Date

Parent Email: _____

Cell Phone: _____



Parent Volunteer Form

Parent Name(s) _____

Email(s) _____

Phone _____ Cell Phone _____

Senior's Name _____

All senior parents are encouraged to participate in **PTA Grad Night 2018**. Opportunities include: Volunteer Coordinator, Fundraising (Auction, Activity Photo Buttons, donation procurement, grant writing, electronics sale coordinator, etc), Senior Slide show, Grad Night Food/Beverages, Bus Coordinator, and more, help with Grad Night events following graduation ceremony.

_____ **I/We would like to be part of the PTA Grad Night 2018 Committee.** You will be contacted via email about meeting dates. Parents who are on the Committee **will** be able to attend the graduation ceremony but must attend the Grad Night events. I'm interested in volunteering on _____.

_____ **I/We would like to help with the Grad Night events following the graduation ceremony on June 6th.** Volunteer opportunities include: (Event set up/decorations, Bus Chaperone, Medical Team, Event Chaperone, Event Security, Event Clean-Up). I'm interested in volunteering on _____.

Thank you for helping make this party a safe, memorable and successful event for the Wilson High School class of 2018!

2018 PTA Wilson HS Grad Night Chairs

Melissa Rubin dmjlrubin@yahoo.com

Julie A Jacobsen julie@berntlaw.com

Please return this form to the WHS office in the PTA Grad Night box.