

GRAD NIGHT

2019



LYME-OLD LYME HIGH SCHOOL SAFE GRAD PARTY PERMISSION FORM

Please return the completed form to the LOLHS Office by Friday, May 31th, 2019.

I give permission for my child, _____, to attend the Safe Graduation Party on Thursday, June 13, 2019. The exact location of the Party will not be disclosed until students arrive at the venue.

All Safe Grad Party attendees will leave LOLHS promptly after a buffet dinner is served at 7:45 p.m. and travel (by an activity bus) to the Safe Grad Party venue. Please note that students ARE NOT allowed to travel to/or from the Safe Grad Party in any manner except for the bus.

All Safe Grad Party attendees will be brought back to Old Lyme for pick-up between 4:30-5:00 a.m. on Friday, June 14, 2019. Students must be picked up by a responsible individual who has not attended the party. The exact pick up location will be disclosed via an email from the Safe Grad Committee by 3:00 a.m. on Friday, June 14, 2019.

Parent/Guardian Name: _____

Student's Home Address: _____

Parent/Guardian Contact Numbers during the Safe Grad Party:

Name: _____ Number: _____

Name: _____ Number: _____

If neither parent/guardian can be contacted, please provide two people that we may contact in case of emergency:

Name: _____ Number: _____

Name: _____ Number: _____

Does the student have food allergies: No _____ Yes _____ Describe: _____

Information the chaperones should know: (e.g. Any medication the student will require during the event):

In the event that neither the parents/guardians, or alternate emergency contacts can be reached, I grant authority to the staff/chaperones of the Safe Grad Party to act in a medical emergency and secure necessary medical treatment for my child.

Family Physician: _____ Phone: _____

Medical Insurance Company Name: _____ ID#: _____

Parent/Guardian Signature: _____ Date: _____