

**WHS PROJECT GRADUATION 2010**  
Permission Slip and Authorization Form

Student \_\_\_\_\_ Phone \_\_\_\_\_ Cell # \_\_\_\_\_

Address \_\_\_\_\_ City/Zip \_\_\_\_\_

I, \_\_\_\_\_, parent/guardian of \_\_\_\_\_ grant permission for my son/daughter to attend and participate in the activities planned for Project Graduation (Graduating Seniors All Night Party) on Sunday, May 16<sup>th</sup> -17<sup>th</sup> from 10:00 p.m. – 5:00 a.m., at Warrenton High School in Warrenton, MO.

I understand that the Graduation Party was organized and will be chaperoned, by the parents, friends and families of the graduating seniors and not an organization.

I understand that this is an alcohol and drug free party and I am aware that my child's bag **will be** checked. Personal belongings are not recommended as they may be stolen (i.e. phones, ipods, money, etc.). Committee members or school district is not responsible for lost or stolen personal items.

I understand that every student must be checked in at Warrenton High School by a parent/guardian or designated person. Once signed in, the students are not allowed to leave, unless a parent/guardian or other designated person is picking them up, and/or previous arrangements have been made, and written permission is given by the parent/guardian.

I agree that all Warrenton High School Code of Conduct rules will be strictly enforced.

I further agree to hold harmless Warren County R-3 School District, Project Graduation Committee parents, chaperones, and students in the event of injury or theft.

Parents are responsible for any damage that occurs by their students. Students **are not** allowed to leave the premises during the night. We strongly suggest students be picked up, and not be allowed to drive home on Monday morning due to lack of sleep.

**Please drop off your student at 10:00 p.m., Sunday, May 16<sup>th</sup> at the athletic doors of WHS. No student will be admitted past 10:30 p.m. Please pick them up at 5:00 a.m. on Monday, May 17<sup>th</sup>. If you are unable to bring your child or pick him/her up please designate who your child can be released with. Authorized adult \_\_\_\_\_ phone # \_\_\_\_\_**

I agree to honor the rules so that everyone can have a great time!!! I understand that the consequence of my inappropriate behavior will result in my being dismissed from the event and a parent/chaperone will be required to escort me from the premises.

Student Signature \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Emergency number during event \_\_\_\_\_

Parent permission required for students under 18 to climb Rock Wall. Parent Initials \_\_\_\_\_

**\$15 Registration made payable to Project Graduation 2010 due to Mrs. Moreau or Mrs. Romaker between Wednesday, April 21<sup>st</sup>-Friday, April 23<sup>rd</sup> in WHS Commons during lunch period. Registration taken after April 23<sup>rd</sup> is \$20.00 and can be made to Mrs. Kramer in Rm. 141. No Registrations will be accepted after May 1<sup>st</sup>.**