

The Senior GRAD NIGHT all-night Safe and Sober Celebration takes place after Graduation on Friday, June 15th. The \$165 ticket price covers all costs for the evening including dinner, all night snacks, breakfast foods, entertainment, activities, prizes and favors. No additional cost - dress is casual, no need for limos, and hair appointments are free inside grad night!

Student's Name		
Parent's Name(s)		
Parent e-mail		
Mailing Address		
City, Zip		
Home Phone		
Parent's phone during Grad Night		

Make \$165 check payable to SRVHS PTSA-GRAD NIGHT

Send this form with your check, the signed Parent's Approval and Student Waiver (including student and parent signatures), and the Plan-It Interactive Acknowledgment of Risk to:

Grad Night P.O. Box 1181 Danville, CA 94526

Please give us your student's sizes f	for these po	otential f	avors:	
Boxer Short	S	M	L	XL
Shirt	S	M	L	XL
Shoe	Women's		Men's	

California State PTA SRVHS GRAD NIGHT - JUNE 15, 2012 Parent's Approval and Student Waiver

	(Student's name) has my/our permission to		
• •	SRVHS on June 15, 2012 at 8:30 p.m. until June 16, 2012 ardian(s) (I as the mentioned student) do hereby, for my		
. , ,			
	my/our heirs, executors and administrators, remise		
_	PTSA, San Ramon Valley Council of PTA's 32nd District		
PTA, and California State PTA, and a	ıll PTSA officers, employees, and agents of each of the		
foregoing, acting officially or otherwi	se, from any and all claims, demands, actions or causes		
of action on account of the referred.	I understand that all valuables should be left at home		
	nentioned above assume no liability for loss. I further		
	ges or drugs are permitted. Their possession or use is		
•	A Breathalyzer will be on site. I hereby certify that the		
-	ighter (myself) and that his/her (my) date of birth is		
	ereby certify that to the best of our (my) knowledge and		
	health. In case of illness or accident, permission is		
	be administered. It is further understood that the		
undersigned will assume full responsi	bility for such action, including payment of costs. I/We		
hereby advise that the above stude	nt has (I have) had the following allergies, medicine		
	ns which should be made known to a treating physician:		
(if none, please	write the word "none'		
(ii lione, pieuse	Write the Word Hone		
	·		
Parent/Guardian Initial: under	stand the safety concerns of having students drive home		
	student up at the conclusion of the event.		
when racigaca, and ragice to pick in	seducine up at the conclusion of the event.		
Parent/Guardian Signature	Print Name/Address/City/Phone		
r arene Guardian Signature			
Parent/Guardian Signature	Print Name/Address/City/Phone		
Student Signature	Print Name/Address/City/Phone		
Alternate Adult in case of emergency	Print Name/Address/City/Phone		
Accorded Addition case of emergency	r rine maine/Addi 633/Gity/r none		

- Complete the registration form, the Parent's Approval and Student Waiver (co-signed by student and parent/guardian), and the Plan-It Interactive Acknowledgment of Risk (If your student will be 17 on June 15, 2012, be sure a parent or legal guardian signs).
- Attach \$165 Check made payable to SRVHS PTSA- Grad Night.
- Mail to: Grad Night; P.O. Box 1181; Danville, CA 94526