

Senior Grad Party 2014

Sunday, June 1st, 2014

Oregon City High School Parent Permission & Emergency Release Form

The senior parents are hosting a drug & alcohol free, All Night Grad Party for the Class of 2014 on Sunday, June 1st from approximately 11:00 pm until 5:00 am the following morning. This form must be completed (front and back) to purchase a grad party ticket for your senior to attend the event.

A parent and student signature is required on both sides of this form. Your signature agrees to the following:

- Agreement to follow all rules and regulations for appropriate school behavior according to the Oregon City School Parent Handbook while attending the party.
- Permission for my Senior to attend.
- Authorize the Grad Night committee to obtain medical care for my Senior in case of an emergency.
- Confirm that you agree to full liability should my Senior require medical treatment.
- The ticket price is non-refundable.

The grad party ticket price includes professional entertainment by Portland Party Works, transportation from graduation to the event and back to the high school, as well as food and fun all night long! Grad Night 2014 is for members of the OCHS class of 2014 only. NO GUESTS ARE ALLOWED. We hope that every senior will attend.

STUDENT & PARENT SIGNATURES & EMERGENCY RELEASE FORM **ALL SECTIONS MUST BE COMPLETE TO PURCHASE TICKET**

Student's Name: _____

Parent/Guardian Name: _____

Address: _____

Phone #: _____ Email address: _____

Senior Student's Date of Birth: _____ Age on 6/09/2014: _____

Doctor's Name & Phone #: _____

Senior's Signature: _____

Parent/Guardian Signature: _____

Signatures REQUIRED on back. See: Accident Waiver and Release of Liability

Return this form and your check to the OCHS accounting office.

ACCIDENT WAIVER AND RELEASE OF LIABILITY

I acknowledge that this event involves physical, mental and emotional activities and carries with it the potential for death, serious injury and property loss. These risks include, but are not limited to, those caused by terrain, temperature, weather, condition of participants, lack of hydration, equipment, vehicular traffic, actions of other people including but not limited to, participants, volunteers, officials, and event monitors and/or producers of this event. These risks are not only inherent to participants, but are also present for volunteers. I hereby assume all of the risks of participating or volunteering in this event.

I realize that liability may arise from negligence or carelessness on the part of the persons or entities being released, from the dangerous or defective equipment or property owned, maintained or controlled by them, or because of their possible liability without fault.

I certify that I am physically fit for participation in this event and have not been advised otherwise by a qualified medical person.

I acknowledge that the Accident Waiver and Release of Liability form will be used by event holders, sponsors and organizers of the event in which I may participate, and that it will govern my actions and responsibilities of said events.

In consideration of my application and permitting me to participate in this event, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows: (A) Waive, Release and Discharge from any and all liability for my death, disability, personal injury, property damage, and the property theft of actions of any kind which may hereafter occur to me including by traveling to and from this event, the following entities or persons:

OREGON CITY HIGH SCHOOL DISTRICT
2014 OREGON CITY HIGH SCHOOL GRAD NIGHT COMMITTEE
OREGON CITY HIGH SCHOOL

Their directors, officers, employees, volunteers, representatives, and agents, the event holders, event sponsors, event volunteers; (B) Indemnify and Hold Harmless the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in this event, whether caused by the negligence of releases or otherwise.

I hereby consent to receive medical treatment, which may be deemed advisable in the event of injury, accident and/or illness during the event.

I understand that I may be photographed at this event or during related activities. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organizers and assigns.

The Accident, Waiver and Release of Liability shall be construed broadly to provide release and waiver to the maximum extent permissible under applicable law.

I hereby certify that I have read this document and understand its content.

Signature of Senior

Print Participant's Name

Date

PARENT/GUARDIAN WAIVER

The undersigned parent or legal guardian does hereby represent that he/she is in fact acting in such capacity and agrees to save and hold harmless and indemnify each and all of the parties referred to above from all liability, loss, cost, claim or damage whatsoever which may be imposed upon said parties because of the senior's participation in the event, and release said parties on behalf of the senior and the parents or legal guardian.

Signature of Parent /Guardian

Print Parent / Guardian Name

Date