

CLASS OF 2019 - PROJECT GRADUATION - June 9-10, 2019 AGREEMENT

(Please complete this Agreement form as well as the Medical Release form)

In order to participate in Project Graduation, every senior and senior's parent/guardian must complete this form. Please return it to the senior's advisor by *Thursday, May 23*. All information will be kept confidential. If the senior is *not* participating in Project Graduation, please indicate that on the form and return it to the advisor.

Student's Name _____ will / will not attend Project Graduation.

Student's Date of Birth _____

Student's Home Address _____ Home Phone _____

Parent(s)/Guardian(s) Name _____

Home Address (if different) _____

Home Phone (if different) _____ Cell Phone _____

Phone numbers where parent(s)/guardian(s) can be reached during evening/night of Project Graduation:

Name _____ Phone _____ Home Phone _____

Name _____ Phone _____ Home Phone _____

In the event of an Emergency, list two people to contact if parent/guardian cannot be reached:

(1) Name _____ Relationship _____ Phone _____

(2) Name _____ Relationship _____ Phone _____

Please read the following policies carefully; they will be strictly enforced throughout the trip:

1. NO possession or use of any drugs, alcohol, cigarettes, vapes, or chewing tobacco.
2. Students shall stay with the group at all times and may not leave early.
3. Respectful behavior and respectful use of facilities is expected at all times.
4. NO cell phones, handbags, backpacks, cameras, wallets, portable music/movie players (CDs, iPods, DVDs, MP3s, etc.). Any such items brought to the bus will be safely stored by chaperones in a plastic bag until the end of the event and then returned. Keys may also be stored with chaperones.
5. Students may bring a sweatshirt or jacket and an EpiPen or other required medication or medical equipment, but the item will be checked and ALL pockets will be inspected by chaperones at the beginning of the event.
6. Students must follow rules set by the chaperones at all times.

We have read and understand the Project Graduation policies, and by signing below, agree to abide by the Project Graduation rules set forth above. Each of us understands that if any of the rules are violated, the student agrees that he/she will be removed from the Project Graduation activity and the parent or guardian agrees that he/she will be responsible for picking up the student from the Project Graduation location before the end of the event if necessary. The student and his/her parent or guardian agree to accept financial responsibility if the student causes any injury or damage to other persons or property during the event. By signing below, each participant in Project Graduation acknowledges that Project Graduation is a parent-driven effort to provide a safe graduation celebration for seniors, and it is not affiliated with Yarmouth High School, the Town of Yarmouth, its faculty, staff or administrators.

Parent/Guardian Signature _____ Date _____
Student Signature _____ Date _____