

PARENTAL AUTHORIZATION & ACKNOWLEDGEMENT OF RISK
WESTFIELD HIGH SCHOOL *2009* ALL NIGHT GRADUATION PARTY

The purpose of the All Night Graduation Party (ANGP) is to provide a safe and fun night without the use of drugs, alcohol, or tobacco products on the night of graduation, known to be one of the two highest risk nights for high school students. This celebration will provide the 2009 graduates the opportunity for the entire class to be together one last time and CELEBRATE!

On the night of June 18, 2009, the ANGP will be held at ESPN Zone, Washington, DC and will begin at 12:00 AM (Midnight) and end at 4:00 AM on the following morning of June 19, 2009. Charter buses will transport graduates to ESPN Zone beginning at 11:00 PM and return to Westfield High School at 5:00 AM. The celebration is a PTSA-sponsored event and is arranged and supervised by parent/family volunteers. By practicing due diligence, every effort has been made to provide a safe and fun celebration for our graduates.

This year, the following types of games and activities are planned.

Activity
Unlimited use of ESPN Zone games and activities.
Photographer for holographic pictures
Dance music provided by a DJ
Blackjack tables
Texas Hold'Em
Roulette Wheels

For questions, please contact Betty Bancroft or Meg Curry at angp@westfieldhs.org

ATTENDANCE RULES

WESTFIELD HIGH SCHOOL *2009* ALL NIGHT GRADUATION PARTY

KEEP THESE RULES FOR YOUR REFERENCE & RETURN SIGNED SHEET

1. The student **MUST** be a 2009 graduate of Westfield High School, or a class of 2009 previous or current foreign exchange student to attend.
2. No dates, siblings, or children of graduates may attend.
3. Everything is included in the price of the ticket. No additional cash is necessary. All food and beverages will be provided.
4. Tickets **MUST** be purchased in advance.
5. The following forms are due at the WHS Main Office by **June 10, 2009**: Attendance Rules, Parent Authorization and Acknowledgement of Risk, Emergency Care Information, and Medication Authorization if applicable. Graduates 18 years of age or older are not permitted to sign forms for parents. **Parent signatures and authorization are required.**
6. All graduates **MUST arrive** at Westfield High School for the ANGP **between 10:30 PM and 11:15 PM on June 18, 2009**, the night of graduation, and enter through **Door # 11**, which is the entrance from the student parking lot near the gymnasium. Buses depart from Westfield High School between 11:00 PM and 11:40 PM.
7. Students **ARE NOT ALLOWED** to drive personal vehicles to ESPN Zone.
8. **All parents/guardians of ticketed students will be notified by telephone if their graduate does not come to the party.**
9. **We strongly encourage graduates to leave their wallet, cell phones, and purses in their vehicles or at home.** A sport bag will be provided to each student attending the ANGP to hold personal belongings. It will be the responsibility of each student to maintain and secure his/her own bag throughout the night.
10. Small prizes such as gift cards will be given to graduates to secure in their own sport bag.
11. Large prizes that graduates cannot carry in their sport bag will be labeled and stored at ESPN Zone by ANGP volunteers. ANGP volunteers will place large prizes on returning buses. Graduates must collect large prizes from their bus upon returning to WHS.
12. Graduates should dress appropriately in casual clothes (shorts, t-shirts) and wear comfortable shoes.
13. The ANGP **is a lock-in**. Graduates are NOT permitted to leave.
14. If it is a medical necessity for a graduate to carry medication and/or medical supplies/equipment with them at all times to be used independently as they have been permitted to do in school (**i.e. diabetes medicine and supplies, inhalers, etc.**), then the MEDICATION AUTHORIZATION FORM included in this packet **must** be completed and returned with this packet.
15. The graduate will respect the ANGP properties and will not do any willful or malicious damage to any property on the premises as according to the Student Responsibilities and Rights. The graduate understands that in the event of inappropriate behavior of any type, he/she may be asked to leave the celebration and agrees that if asked to leave, he/she will do so. The parent/guardian will be contacted and made aware of the situation and asked to pick up the student at ESPN Zone.
16. The parent/guardian must be available by telephone or cell phone throughout the celebration so that they can be notified of any concerns, problems, or emergencies. They should also be available to provide transportation home for their graduate should the need arise.

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Graduates Who Are Suspected of Arriving Intoxicated

1. A graduate suspected of being intoxicated by alcohol or drugs, or smells of alcohol or drugs during check in will **NOT** be allowed to go to the ANGP.
2. A graduate who is suspected of being intoxicated will be escorted to the “holding tank” room, and the ANGP Chairs will inform the graduate he/she will not be able to attend the ANGP.
3. The police officer on duty at the event will be summoned to the “holding tank”.
4. WHS Security personnel or security chaperones will call the home of the graduate to inform the parent/guardian of the situation. The parent/guardian will be asked to come pick the graduate up and transport him/her home. The graduate **WILL NOT BE ALLOWED TO DRIVE HIMSELF/HERSELF HOME.**
5. If no one is home, a message will be left, when possible, and the graduate will remain in the “holding tank” until a parent/guardian is able to come to transport the graduate home.

Graduates Who Cause A Disturbance During The Celebration

1. Disturbances include physical fighting, yelling angrily at another graduate or chaperone, stealing, and destruction of the school, rental facility, rental equipment, or ANGP property or the property of any attendee or volunteer.
2. A chaperone that witnesses a graduate causing a disturbance will report the incident to the appropriate personnel.
3. The Security Chair and/or ANGP Chair, with the support of the on duty police officer, will escort the graduate to the “holding tank”, the parent/guardian will be notified, and the graduate will remain there until the parent/guardian arrives to transport the graduate home.
4. The graduate will not be allowed to return to the celebration.
5. As stated in the SR&R, “improper touching” is prohibited and the security and/or adult personnel present at the ANGP reserve the right to enforce this rule to the point of removal from the celebration if the graduate refuses to abide by it.

ATTENDANCE RULES

WESTFIELD HIGH SCHOOL *2009* ALL NIGHT GRADUATION PARTY

PLEASE SIGN AND RETURN THIS PACKET

Note: Graduates and their parents/guardians are required to **sign and return** this form by **June 10, 2009**.

Return signed form to ANGP box located in the Westfield High School Main Office.

Westfield High School, 4700 Stonecroft Blvd, Chantilly, VA 20151

Students will not be allowed to submit the Risk Forms on the night of the ANGP.

I understand and agree to abide by the enclosed Attendance Rules. I understand that I must arrive and check in between 10:30 pm and 11:15 pm. I understand that the last bus will depart from Westfield High School at 11:40 pm and if I have not checked in by that time, I will not be allowed to attend the ANGP, and my parent/guardian will be called and notified.

Printed Student Name

Student Signature

Date

I understand and agree to abide by the enclosed Attendance Rules. I understand that I MUST be available by phone throughout the night. I understand that, if asked, I will be available to transport my graduate home. I agree to respect and accept the decisions made by the ANGP committee and all its volunteers regarding any actions taken by them pertaining to my child and the attendance rules.

Printed Parent/Guardian Name

Parent/Guardian Signature*

Date

*Parents **must** sign even if graduate is 18 years of age or older.

EMERGENCY CARE INFORMATION

WESTFIELD HIGH SCHOOL *2009* ALL NIGHT GRADUATION PARTY

PLEASE SIGN AND RETURN THIS FORM

*Note: Graduates and their parents/guardians are **required to sign and return this form by June 10, 2009.***

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Students will not be allowed to submit the Risk Forms on the night of the ANGP.

In the case of emergency, volunteers staffing the party will call 911. Every effort will be made to contact a parent, a guardian, or a designated emergency contact.

STUDENT NAME: _____

IN CASE OF EMERGENCY DURING THE ANGP, CONTACT:

Printed Parent/Guardian Name(s): _____

Home Address: _____

Home Phone Number: _____ Cell Phone Number: _____

Work Phone Number and/or Pager: _____ email: _____

LIST 2 PERSONS WE SHOULD CALL IN AN EMERGENCY IF THE PARENT(S)/ GUARDIAN(S) CANNOT BE REACHED:

Contact Name: _____ Phone Number: _____

Contact Name: _____ Phone Number: _____

WITH A PHOTO ID, THE FOLLOWING PERSONS ARE AUTHORIZED TO PICK UP MY CHILD.

1. _____

2. _____

My child's medical care is provided by (Doctor, Clinic etc.) _____

Telephone Number: _____

INSURANCE INFORMATION

My child has medical coverage with _____

Insurance Carrier

Please inform us of any current health conditions for your child by indicating all that apply and providing specifics, where necessary:

Asthma _____ Hemophilia _____ Cancer _____ Seizures _____ Diabetes _____ Vision Problems: Glasses__ Contacts__

Heart Problems (be specific) _____

Physical Disability (be specific) _____

Respiratory (be specific) _____

Other (be specific) _____

ALLERGIES: Please list ALL ALLERGIES your child has; include medication, food, environmental, and "other" allergies.

If your child is "allergy free," write NONE.

Please list all medications and dosages that your child receives on a continual basis.

MEDICATION AUTHORIZATION

Release and Indemnification Agreement

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COMPLETE THIS SIDE OF THE FORM ONLY IF YOUR CHILD WILL BE CARRYING MEDICATION DURING THE PARTY.

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Due to medical necessity, I do hereby give my permission for my child, _____, to keep on his/her person at all times for the duration of the All Night Graduation Party celebration and to self administer the following medication(s) and/or medical supplies/equipment that are listed below.

Please be as specific as possible when listing. For medications, include dosages and times to be taken.

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____

Printed Parent/Guardian Name

Parent/Guardian Signature*

Date

* Parents **must** sign even if graduate is 18 years of age or older.

I hereby release and agree to hold the Westfield High School PTSA, the 2009 ANGP Committee and its volunteers, employees, any other officers, staff members, and agents blameless from any lawsuits, claims, expenses, demands or actions, etc. against them for permitting my child to carry and self administer the above mentioned medications and/or medical supplies/equipment for which I have given permission.

Printed Parent/Guardian Name

Parent/Guardian Signature*

Date

* Parents **must** sign even if graduate is 18 years of age or older.