

Reduced

## UCHS SENIOR GRAD PARTY TICKET ORDER FORM JUNE 15, 2021 9pm to 1am



# STUDENT & PARENT AGREEMENT ALL PAGES MUST BE COMPLETELY FILLED OUT, SIGNED & RETURNED WITH PAYMENT

Please Print:	
Student Name	E-mail
Parent Name	E-mail
Address	Student Birthdate
Telephone # ()_	_Cell # ()

In order to meet the deadline noted below, PAYMENT and completed form must either be received in Senior Grad Party mailbox by close of school business day OR if mailed, must be postmarked BEFORE the effective price increase date. Forms submitted without payment will not be accepted.

## \$40 reduced price for all!



Price may increase after June 11, 2021
Limited number of tickets available

PLUS \$\_\_\_\_\_ donation to help offset Senior Grad Party Costs

Please make checks payable to "UCHS PTSA" or pay by credit card at www.uchsptsa.org Mail to: UCHS PTSA Senior Grad Party, 6949 Genesee Ave., San Diego, CA 92122

### **Code of Conduct Agreement**

## BY SIGNING THIS AGREEMENT, STUDENTS AND PARENTS HEREBY AGREE TO ALL TERMS FOR ACCEPTANCE INTO SENIOR GRAD PARTY.

#### Student, by signing this agreement on page 2 you understand & will abide by the following rules:

- 1. I must arrive between 9:00pm and 10:00pm. Picture ID is required for admittance.
- 2. I will not consume alcohol or other drugs the day of the Senior Grad Party.
- 3. I will not bring alcohol, other drugs, e-cigarettes or tobacco to the Senior Grad Party.
- 4. I understand that I will not be allowed to leave without parent/guardian permission.
- 5. Once I leave, I will not be allowed back into the Senior Grad Party.
- 6. All containers (purses, backpacks, etc.) WILL BE EXAMINED & KEPT AT THE CHECK-IN AREA for safekeeping upon entering Senior Grad Party.
- 7. Senior Grad Party and the PTSA are <u>not responsible</u> for lost or stolen items.
- 8. I understand that inappropriate dress and dancing will not be allowed. The decision on propriety of dress and dancing is up to the Senior Grad Party adult chaperones.
- 9. I will not bring any medications (including No-Doz, etc.) to the Senior Grad Party.
- 10. I waive all claims which I might have against the UCHS PTSA Senior Grad Party Committee and any volunteers involved in setting up and putting on the Senior Grad Party celebration, as a result of any injuries which may occur as a result of the Senior Grad Party celebration or my decision to leave early.

#### Furthermore, by signing this agreement on page 2, students & parent/guardian agree to the following:

- 11. UCHS Senior Grad Party is not responsible for me or my actions should I leave after I have checked-in and before the conclusion of Senior Grad Party, with or without parent/guardian knowledge or permission.
- 12. I/We give Senior Grad Party volunteers permission to use their judgment in obtaining medical services as required for me/my child. I/We give permission to medical personnel to treat me/my child with the understanding that any medical or hospital costs will be our responsibility.
- 13. I/We assume responsibility, including financial, for any and all damages and injuries to other graduates, the venue and Senior Grad Party volunteers caused by me/my child's actions during Senior Grad Party.
- 14. I/We understand that photos and video may be taken of me/my child at Senior Grad Party. I/We give Senior Grad Party permission to post pictures of me/my child on Smugmug.com (a password protected photo sharing website), the UCHS PTSA website, the UCHS PTSA/Senior Grad Party Facebook page and any other UCHS PTSA, ASB or other websites or promotions.
- 15. Ticket fees are not refundable, except in severe extenuating circumstances. In such circumstances, approval by the Senior Grad Party Chair is required for a refund.



### PARENT'S APPROVAL AND STUDENT WAIVER

This is a PTSA sponsored event for which we require parental consent for every student.

	1	1 1	,
Name of Minor	including teaser eve event on June 15, 202 has permission to po	participate in all events relating to UC nts during the 2020-2021 school year, a 21 held on the UCHS campus or anothost my child's first name and last naments who will be attending the event.	and the Senior Grad Party her acceptable location. SGP
Furthermore, at this year's Senior Grashow will consist of volunteers from eligible to be hypnotized by the Mental Illusionist's show. You must ch	the audience who will lateral Illusionist. Permission	be hypnotized. Unless indicated other on is also hereby granted for your child	erwise below, all students are d to be videotaped during the
□ No, I do not wish my child to be in t	he show, but I give pern	nission for my child to watch the show	7.
The undersigned parent or guardian assuractivities. I hereby release and discharge demands for any damage, loss or injury these activities, unless caused by the neg	e the California State PTA y to the student, the stud	A, all PTSA officers, employees and ag	ents from all liability, claims or
I do hereby certify that to the best of m granted for emergency treatment to b responsibility for any such action, includ	e administered. It is fu		
I hereby advise that the above named r should be made known to a treating phys		= = =	sual physical condition which
If none, please write none.			_
Parent/Guardian:			
Parent/Guardian: You will <u>autor</u> 11 pm or wishes to leave Senior a cell phone number if you will n	Grad Party before 1		
(Initial) <i>I do <u>not</u> need to</i> the end of Senior Grad Party.	<b>be called</b> if my grad	duate does not arrive by 11 pm	or wishes to leave before
I give my permission for the above agree to the above conditions. I w graduate will not be allowed ad immediately from the venue if hunderstand that underage drink all claims which my child or I mig involved in setting up and putting cresult of the Senior Grad Party celebrates.	ill be able to be conta mission into Senior ne/she is suspected ing is against the la ght have against the la on the Senior Grad Pa	cted during Senior Grad Party hour Grad Party and that I will be as of being under the influence of the and will not be tolerated at SUCHS PTSA Senior Grad Party Corrty celebration, as a result of any in	rs. * I understand that my ked to pick up my studen f alcohol and/or drugs. Senior Grad Party. I waive mmittee and any volunteen
Phone # where you can	n be reached during Se	enior Grad Party Alternate Em	ergency Phone
We have read and understand ea abide by all rules of this agreem		nent on pages 1 and 2 of this fo	rm and agree to
Student's Name (Please Print)		Student's Signature	Date
Student's Name (Please Pillit)		Student's Signature	Date
Parent/Guardian Name (Please P	Print) F	Parent/Guardian Signature	Date