



LFAS Dry Grad 2014

Student/Guest Waiver

Wednesday, June 25, 2014
 Highly Classified Location
 11:30pm -5:30am

Complete Sections A and B, and present this waiver at time of purchasing your Dry Grad ticket. If bringing a guest, complete Sections A, B, and C.

NO DRY GRAD TICKET SOLD WITHOUT A COMPLETED WAIVER

Section A: STUDENT AGREEMENT

I, _____, understand LFAS Dry Grad 2014 is a time of celebration and fun with friends and fellow students in a non-alcoholic, non- smoking, drug-free location. I also understand that this activity is run by parent volunteers and not by Langley Fine Arts School (LFAS). I agree that if I commit a prohibited activity (including but not limited to possession of alcohol and/or drugs) or engage in an activity or behaviour considered to be disruptive to others or property I will be sent home at the expense of my parent(s) or guardian(s). I understand there are NO in/out privileges during the event; I must remain at the event until 6:00 AM. However, if I want leave before this time, I will only be permitted to go with my parent(s)/guardian(s).

Student Signature		Date	
Email Address			

Section B: PARENT/GUARDIAN CONSENT

I, _____, voluntarily give consent for _____ to participate in Dry Grad 2014 held immediately following the grad banquet Wednesday, June 25. I also understand this activity is run by parent volunteers and not by Langley Fine Arts School (LFAS) nor the Langley School Board nor Newlands. I accept and assume all risks relating to their optional participation in events & interactive games and acknowledge that risks and dangers exist and injuries may occur. In the event of an emergency or should the participant need to be picked up by a parent/guardian for other reasons I can be contacted at the following phone number(s) during that evening. Pickup location will be posted on <http://lfasdrygrad.webstarts.com> before midnight on the evening of Dry Grad.

Parent/Guardian Signature		Date	
Home phone		Cell number	

Section C: GUEST INFORMATION and ACKNOWLEDGEMENT (if applicable)

Guest Name		Age	
Home number		Cell number	
I, _____, and my parent/guardian _____ understand that by inviting this guest we take full responsibility for this guest while attending the LFAS Dry Grad event.			
LFAS Student Signature			
Parent/Guardian Signature			

Dry Grad Committee ONLY

Ticket #	Payment Method: <input type="checkbox"/> Cash <input type="checkbox"/> CK #
Car Pool Information :	

Any questions about Dry Grad 2014 can be directed to DryGradLFAS@gmail.com