GradNite Parent & Student Agreement

Student's Name (printed)					
Student Address:					
Parent's Name (printed)					
Parent's Address:					
Parent's Emergency Phone Number:					
I agree that my child will abide by all rules and regulations reasonably adopted in connection with GradNite. I understand that the failure of my child to observe these rules and regulations may result in my child being refused entrance to GradNite or being ejected from GradNite.					
I agree to waive any and all claims of any kind whatsoever, whether resulting from an injury or otherwise, and further agree to release, indemnify and hold Region 15, Pomperaug High School, GradNite, and of their respective board members, employees, consultants, officers, directors, volunteers and representatives harmless from and against any and all liability arising out of or relating to my child's participation in GradNite.					
I further understand that GradNite assumes no liability for lost, misplaced stolen and/or damaged property and I hereby agree to waive any and all claims related thereto and release GradNite and its board members, consultants, officers, directors, volunteers and representatives harmless from from any liability in connection therewith.					
I/We also give our permission for GradNite to use the likeness of our child in photographs or promotions related to GradNite.					
Parent/guardian name (printed)					
Parent/guardian name (signature)					
I,, am under 21 years of age, and I agree to the terms of this Release Form as					
completed and signed by my parent/guardian:					
Student Signature (if student is under 21):					
For safety reasons, we STRONGLY encourage you to drop off and pick up your graduate.					

This form may be filled out and submitted through our website. Or, download and fill this form out completely & mail to GradNite, PO Box 951

Southbury, CT 06488 or drop it off in the PHS Main Office.

Pick up time is 5:30 a.m.

PARTICIPANT RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT

Organizatio		BEFORE SIGNIN	G	
Participant 1	name			
	n of being allowed to participate in any way in appreciate, and agree that: The risk of injury from the activities involve paralysis and death.		· · · · · · · · · · · · · · · · · · ·	anent
2.	I KNOWINGLY AND FREELY ASSUME ARISINGFROM THE NEGLIGENCE OF T participation.			ny
3.	I willingly agree to comply with terms and c during my presence or participation, I will re nearest official immediately.			
IND othe (RE DIS	for myself and on behalf of my heirs, assigns DEMNIFY, AND HOLD HARMLESS THE Per participants, sponsors, advertisers, and, if application of the properties	ARTY PEOPLE INC, oplicable, owners and s, losses, and liability or damage to person or	its officers, officials, agents and/or emplo lessors of premises used to conduct the ever arising out of or related to any INJURY, property, WHETHER ARISING FROM	ent
infallible. The instructions, a i. I exactivity is pur i. I he from any and activity or my omissions of i. Show the from the instruction of its in	thermore, Party People, Inc.'s employees by might be unaware of a participant's fitn and the equipment being used might malfit pressly agree and promise to accept and a ely voluntary, and I elect to participate in ereby voluntarily release, forever discharge all claims, demands, or causes of action, vuse of Party People, Inc.'s equipment or farty People, Inc.'s or anyone acting or greement, I agree to indemnify and hold the trify that I have adequate insurance to cove to bear the costs of such injury or damage or physical condition I may have. In that I file a lawsuit against Party People, That the substantive law of that state shall gree that if any portion of this agreement if force and effect. Is document, I acknowledge that if anyone the found by a court of law to have waived laim from which I have released them here	less or abilities. The unction. Issume all risks exist spite of the risks. e, and agree to inder which are in any way acilities, including a contheir behalf, be rehem harmless for all yer any injury or dance myself. I further continuous is found to be void of is hurt or property in my right to maintai	y may give inadequate warnings or ing in this activity. My participation in mnify and hold harmless, Party People, connected with my participation in the ny such claims which allege negligent acquired to incur attorney's fees and cost such fees and costs. I such fees and costs. Inage I may cause or suffer while participatify that I am willing to assume the Report of the conflict of law report in the state of Connecticut, and a without regard to the conflict of law report in the state of Connecticut, and the conflict of law report in the state of Connecticut, and the conflict of law report in the state of Connecticut, and the conflict of law report in the state of Connecticut, and the conflict of law report in the state of Connecticut, and the conflict of law report in the state of Connecticut, and the conflict of law report in the state of Connecticut, and the conflict of law report in the state of Connecticut, and the conflict of law report in the state of Connecticut, and the conflict of law report in the state of Connecticut, and the conflict of law report in the state of Connecticut, and the conflict of law report in the state of Connecticut, and the conflict of law report in the state of Connecticut, and the conflict of law report in the c	Inc. Inc. is acts of ts to ipating isk of I I ules of ns shall
I HAVE REALITS TERMS, I	D THIS RELEASE OF LIABILITY AND A UNDERSTAND THAT I HAVE GIVEN UI D VOLUNTARILY WITHOUT ANY INDU	ASSUMPTION OF R P SUBSTANTIAL R		
	articipant's Signature	Age	Date	
provided above narmless the R	FOR PARENTS/GUARDIAN (UNDER AGE 18 A Y) that I, as parent/guardian with legal responsite of all the Releasees, and, for myself, my heir eleasees from any and all liability incidents to be, EVEN IF ARISING FROM THE NEGLIGE	T TIME OF REGIS' ibility for this particip s, assigns, and next of my minor child's invo	TRATION) ant, do consent and agree to his/her release kin, I release and agree to indemnify and obversent or participation in these program	hold s as

Date

Parent/Guardian Signature

Emergency Phone Number(s)