

PARENT WAIVER FORM

HOWARD HIGH SCHOOL PTSA AFTER PROM EVENT
APRIL 20-21, 2018 @ HOYT'S WEST NURSERY CINEMA

All ticket requests must be accompanied by the signed parent waiver form for each ticket.

STUDENT NAME: _____
HHS GRADE: 12 11 10 9 NON-HHS:

Guests are any students who do not attend Howard High School, or are HHS Freshmen or Sophomores

GUEST OF: _____
(HHS Student Name)

IF YOU ARE BRINGING A GUEST FROM OUTSIDE OF HOWARD HIGH SCHOOL, YOUR GUEST MUST ALSO ATTEND THE HHS PROM, AND HAVE PRE-APPROVAL FROM THE HHS ADMINISTRATION. YOU MUST ALSO PRESENT THIS COMPLETED AND SIGNED FORM FOR YOUR GUEST TICKET.

I have read and understand the Rules and Codes of Conduct for the HHS PTSA After Prom Event which will be held on beginning at 11:00 p.m. on April 20th until 4:30 am on April 21st. My child and I agree to follow these rules. I permit the above named Student/Guest to attend this event. I understand that if my child wishes to leave the event before the stated 4:30 am end time, they will not be allowed to re-enter the event, and I must be present to sign my child out in person if I agree to their leaving the event before 4:30 am or designate another adult to do so (see below).

I understand that if my child does not arrive at the event on the bus transportation provided on April 20-21, 2018, they will not be allowed to enter, and I will receive a phone call alerting me that they have not arrived, or they are being sent home.

In consideration of the acceptance of my child's entry in the HHS PTSA After Prom Event on Friday, April 20, 2018 from 11:00 pm to 4:30 am, I, the undersigned participant, intending to be legally bound, do hereby for myself and heirs, executors, administrators and assigns, forever waive, release and discharge any and all rights, claims and actions for damages that I may have, or that may hereafter accrue to me against the Maryland PTA including all units and councils, and all of their officers, directors, members and volunteers.

I attest and verify that my child is physically fit and able to participate in this event and acknowledge that I am aware of the inherent risks in participating in an event of this type.

(Parent Name - PLEASE PRINT) _____

(Parent Signature) _____ (Date) _____

Parent Home Phone # _____ Parent Cell Phone# _____

(Student Name - PLEASE PRINT) _____

(Student Signature) _____ (Date) _____

We require that an adult Parent/Legal Guardian/Designee be present to sign out the child, and confirm transportation. If you would like to designate another Adult to sign out your child please indicate this person's name and contact information below. My child has my permission to leave the HHS PTSA After Prom Event prior to 4:30 a.m. on April 20-21, 2018. I further designate the following individual(s) to sign out my child and make sure they arrive safely to their final destination, in the event that I am not present.

Name: _____
Cell Phone # _____