

Chapel Hill - Carrboro

# Project Graduation 2016

**SENIOR** Release/Consent Form **Side 1**



**Senior's** Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

**Senior's** Advocacy/Homeroom \_\_\_\_\_ English Teacher \_\_\_\_\_

**Senior's** Cell Number \_\_\_\_\_

Parent/Guardian \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_

Parent Telephone (H) \_\_\_\_\_ (Cell) \_\_\_\_\_

Parent/Guardian Telephone on 6/11/16 \_\_\_\_\_

**Guest's** Name \_\_\_\_\_



# Project Graduation 2016

## SENIOR Release/Consent Form **SIDE 2**

\_\_\_\_\_ plans to attend Project Graduation on Saturday June 11, 2016, 11 PM – 4 AM Sunday June 12, 2016 at the UNC Student Union. We, the undersigned, have read the “Rules and Information” on the invitation and agree to abide by all the rules as set forth therein. We further understand that participants may be asked to leave if they are in violation of these rules. In consideration of the production of the 2016 Project Graduation event(s), the undersigned, for themselves, their heirs, successors, and personal representatives, hereby release and absolve the producers of said event(s) from any and all liability, claims, actions and demands, for any and all damages, loss, injury and suffering sustained by the undersigned and resulting from, or in any way, connected with, said event(s) and regardless of whether or not caused by acts, organizing entities, their members, officers and directors, and all sponsors, contributors, volunteers and chaperones. The undersigned understand that participants in said event(s) are licensees and agree to assume the risk of any and all accidents, injuries and losses they might incur.

*I hereby consent to and authorize the use and reproduction, in print or electronic format, by Chapel Hill Carrboro City Schools(CHCCS), Project Graduation or anyone authorized by CHCCS, Project Graduation of any and all **photographs** which will be taken at Project Graduation for publicity purpose, without compensation. All images, electronic, negative or prints are owned by CHCCS.*

**Senior's** signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian signature \_\_\_\_\_ Date \_\_\_\_\_

Chapel Hill - Carrboro

# Project Graduation 2016



## GUEST Release/Consent Form **Side 1**

**Guest's** Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

**Guest's** Advocacy/Homeroom \_\_\_\_\_ English Teacher \_\_\_\_\_

Parent/Guardian \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_

Parent Telephone (H) \_\_\_\_\_ (Cell) \_\_\_\_\_

Parent/Guardian Telephone on 6/11/16 \_\_\_\_\_

**Inviting Senior's** Name \_\_\_\_\_



# Project Graduation 2016

## GUEST Release/Consent Form **SIDE 2**

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**Guest's** signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian signature \_\_\_\_\_ Date \_\_\_\_\_