

GLHS GRAD BASH 2021 REGISTRATION

Early Registration NOW thru December 31, 2020: \$75

After December 31: \$100, DEADLINE for registration: April 30, 2021

Dear Parents:

A registration form and Parent Consent/Emergency Care Form must be filled out and Payment submitted at the same time and **no later than April 30, 2021**; there will be no exceptions for late comers!! We must have all forms completed and payment submitted in order for your Senior Student to be added to the list and to be able to participate.

Please return completed form(s) and payment to the address below:

*****SORRY, NO CASH ACCEPTED!!! CHECKS, CASHIER CHECKS, OR MONEY ORDER ONLY!!!**

MADE OUT TO AND SENT TO:

GLHS GRAD BASH
P.O BOX 514
RICHLAND, MI 49083

Student Name: _____

Address: _____

Parent/Guardian Name: _____

Phone: _____

Email: _____

Parent/Guardian Name: _____

Phone: _____

Email: _____

Questions: please contact Amber Shumaker: shumakerbunch.as@gmail.com

Administrative Use Only:

Check/MoneyOrder#:

Date Rec'vd:

Parent Consent for Participation and Emergency Care Form

In order for your child to participate in the **SENIOR ALL NIGHT GRAD BASH EVENT**, please complete the following information:

Name of Student: _____ Date of Birth: _____

Address: _____

Name(s) of Parent Guardian(s): _____

Phone number where you can be reached in case of an emergency: _____

_____ has my permission to attend the **SENIOR ALL NIGHT GRAD BASH EVENT, Thursday June 3, 2021**; immediately following graduation ceremonies until returned back to the High School on Friday June 4, 2021. I understand that my child must turn in this form before they will be allowed to participate in the activities. I also understand the following:

- 1) Parents/Students must provide their own transportation home from the High School on Friday June 4.
- 2) **This event is for Gull Lake High School Seniors Class of 2021 graduates only.** No other guests will be allowed, other than chaperones assigned to the event.
- 3) **ALL SCHOOL RULES APPLY** during this time. Failure to comply with school rules or grossly inappropriate behavior will result in a call to the parents/guardians and the student will be dismissed for the remainder of the evening and will forfeit the Registration fee.

I understand that my participation and/or my child's participation in this activity is voluntary and I accept full responsibility for all claims and liabilities of any kind arising out of my and/or my child's participation in this activity.

As parent(s) or legal guardian(s) of the above named student, I (we) grant permission to seek and/or administer emergency medical care/treatment on my(our) behalf in the event that my child's health and well-being is involved, and my child, or myself, as parent(s)/guardian(s) is/are unable to respond or cannot be reached at the time of the incident in a timely manner.

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Even though you as a parent/guardian have given a phone number where you can be reached during the **SENIOR ALL NIGHT GRAD BASH EVENT**, in the event we are unable to contact you, please provide the following information:

Person to be contacted if you are unable to be reached: _____

Relationship: _____ Phone number: _____

Student's Physician & Phone Number: _____

Hospital Preference: _____

Health Insurance Company: _____

Group#: _____ Contract#: _____

Allergies or medical supplies: Yes _____ No _____

If Yes, Please Explain: _____
