

SENIOR ALL NIGHT PARTY

Saturday, June 12, 2021 ♦ 11:00 PM – 4:00 AM



Ticket: \$100

Tickets are non-refundable. No tickets are distributed, student's name will appear on a registered list at check-in.

Order deadline is May 17th, 2021. No walk-ins will be admitted at the door!

Doors open at 10:30pm

Please see your counselor if you need confidential financial assistance and/or are a Free and reduced Lunch participant.

Ways to Sign up and pay!

1. Online RCS Payment System
<https://rochesteronline.ce.eleyo.com/course/782/school-event-fees-20-2021/rhs-sanp-senior-all-night-party>
2. Cash/Check payable to *Rochester Community Schools* (Rochester SANP/Student Name in memo) **INCLUDE SIGNED WAIVER WITH PAYMENT.**
Return to Main Office (marked SANP) by 5/17/21
1361 Walton Blvd
Rochester Hills MI 48309

Masks Required



STUDENT PERMISSION & WAIVER FORM

The Senior All Night Party (SANP) will be held at Rochester High School. Main Entrance Only. The ticket includes food, games, prizes, and entertainment. Must show **Student ID (required) and NO bags/purses allowed.** **Doors locked at 12am until dismissed at 4am.**

I hereby give my permission for my son/daughter: _____ to attend the Rochester High School Senior All Night Party on **Saturday, June 12, 2021.** I understand that games, activities and devices will be available which may pose certain risks to the participants. I hereby assume such risks for the student identified hereon and waive and hold the Rochester Community Schools, the Senior All Night Party Committee and volunteers, and the company and its employees and operators providing the games, activities, and devices harmless from liability relating to the use of such games and devices. In addition, my student will abide by all health rules and regulations at the event. The RCS Student Code of Conduct will be enforced at the event and all District and mandatory state or local health protocols will be followed. **Masks will be worn by all the participants during the entire event. Sanitization procedures will be in place at the event.**

In consideration of being allowed to participate in RHS SANP, the undersigned acknowledges, appreciates and agrees that:

1. Participation includes possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation as regards protection against infectious diseases. If, however, I observe any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS RHS SANP, their officers, officials, agents, and/or employees, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event (Releasees), WITH RESPECT TO ANY AND ALL ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

Parent Signature: _____ Email Address: _____

Student Signature: _____

PRINT Emergency Contact (Night of Party): _____ Phone Number: _____

Questions? Contact: Kathleen Lawson (klawson5113@gmail.com) or Anurita Kishan (anuritadidi@yahoo.com)

Please submit the signed waiver with cash or check payment. If you have signed and paid online please print a copy for your records.

[Internal Use]: Check# _____ Cash: _____ Online: _____ Waiver (Y/N) _____ Date Recd: _____