



Dry Grad Registration Information

As a reminder....The 2019 Dry Grad is an event which provides students with a safe, drug and alcohol-free environment to celebrate their graduation. It is a fully supervised fun event, sponsored and fundraised by the Parents. A place where the grads can party with their friends, win excellent prizes, be entertained and participate in a fun filled, action packed night of celebration.

In order to make this event successful, we need parent volunteers. Please go to www.dssgrad.com/volunteer and you will find the listed volunteer sign ups. Please follow instructions and sign up where you can help out.

The cost of hosting the day's events is approx. \$200-250 per student. \$100 of that is raised through your contribution. This contribution will include a ticket to the event and the T-shirt noted on the registration form. The additional funds will be made up by fundraising throughout the school year. This does not include what it takes to run the event through volunteers or the many prizes that get donated by our very generous businesses and friends in the community.

Organization and incurred costs for this event are in full swing. We need your payment as soon as possible!

Registration Deadline: April 5th 3:00pm

DRY GRAD REGISTRATION PACKAGE:

Please complete the 3 forms as soon as possible:

1. DSS Dry Grad Registration Form
2. DSS Dry Grad 2019 Waiver
3. Houle Grad 2019 Waiver

Both forms should be returned to the school, as soon as possible.

Payments can be made in the two following ways:

1. By E-transfer - send to treasurer@dssgrad.com
 - ★ Please use the Question: What year do they graduate? Answer: 2019
 - ★ Please type your child's **Name** and **Student number** in the message space and send.
2. By Cheque: Please make out to "*DELTA SECONDARY DRY GRAD*"
 - ★ Please attach to Registration form and waivers and either mail to Delta Secondary at 4615-51 St. Delta, BC V4K 2V8 or drop off into the box located in the school office.
 - ★ Please write the students Name and Student number on the envelope) for drop off.

No information contained in the forms will be shared outside of the Dry Grad Executive Committee...all * fields must be completed



DSS 2019 DRY GRAD REGISTRATION FORM

Please complete this form and send it with payment to the school as soon as possible.

All grads MUST be registered in advance to attend

Student Name: _____ Phone: _____

Address: _____

Parent/Guardian Name(s): _____

Cell # _____ Email: _____

Contact Phone number(s) for the night of Friday May 31, 2019 during the Dry Grad Event.

Medical Concerns (allergies etc.) _____

DSS Dry Grad T-Shirt adult size: (circle) S M L XL XXL

May we contact you (parent) about volunteering at the Dry Grad Event Y / N

I hereby give permission for _____ to participate in all activities provided at the DSS 2019 Dry Grad at their own discretion. I will not hold any DSS 2019 Dry Grad Committee member or event volunteer responsible for any harm that may come to my child as a result of this event.

X _____
Parent/Guardian signature

I have read and agree to adhere to the rules on the attached DSS Dry Grad 2019 Waiver.

X _____
Student signature

Contribution Fee \$100 (Cheque attached)

E-transfer completed on _____

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DSS Dry Grad and Grad Walk 2019 Waiver Form

All Dry Grad Students and Parents must sign this waiver in order for the student to receive a ticket to the event.

The intention of this waiver is to ensure that all DRY GRAD student attendees experience a fun, respectful and safe series of events during the 2019 Graduation Celebration.

I, (student-print your full name) * _____ agree to adhere to the following SIX (6) Grad Walk & Dry Grad expectations:

1. I will not attend the 2019 Grad Walk or Dry Grad event while under the influence of, or be in the possession of ALCOHOL or DRUGS.
2. I agree to arrive at the Dry Grad event between 11:00pm and 12:00 am. I understand the doors will be closed at 12:00am and I cannot enter after that time.
3. I agree that I will not be allowed back to re-enter Dry Grad once I leave the event: *see note below*
4. I understand that my entrance into DRY GRAD is not guaranteed if I am found in possession of or under the influence of ALCOHOL or DRUGS and that my parents/guardians will be called to pick me up.
5. I understand that if I choose to leave prior to 4:30am that a parent/guardian will have to be contacted and that arrangements for transportation must be made. (We have an agreement with the Corporation of Delta that we will not release and students directly onto the street prior to 4:30am)
6. I understand that I must be present at the Ladner Community Centre to claim ANY prizes.

Note: Special arrangements, under special circumstances may be made for entry and re-entry by attaching a letter of request signed by a parent and submitting it with this waiver.

This waiver must be signed by both the student and parent and returned on or before the time of picking up the Dry Grad ticket and t-shirt.

*STUDENT SIGNATURE: _____

*PARENT/GUARDIAN SIGNATURE: _____

*PARENT/GUARDIAN: Phone number you can be reached at during the Dry Grad event

*Phone : _____

I have the following special needs request related to the Dry Grad Event.

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ACKNOWLEDGMENT OF RISK STATEMENT

In consideration of Houle Games and Entertainment Ltd. (hereafter "Houle") allowing me/my child to participate in its activities:

AS A PARTICIPANT OR PARENT/GUARDIAN, I UNDERSTAND AND ACKNOWLEDGE THAT:

Houle provides equipment for activities including but not limited to Mechanical Bull Ride, Kids Bouncers and Slides, Inflatable Games, Carnival and Picnic Games, Casino Rentals, Arcade and Video Games, Sports Simulation Games, Laser Tag, Sports Bar Style Table Games, Money Booth and Photo Booth Rentals, Specialty Artists and Entertainers, Music Services (referred to herein as "activity"). More information on the activities can be found on our website at www.houlegames.com.

Participation in an activity entails known and unanticipated risks that could result in physical or emotional injury or damages to me/my child, to property, or to third parties. Such risk cannot be eliminated without jeopardizing the essential qualities of the activities.

The risks of these activities include but are not limited to sprains, torn muscles and/or ligaments; fracture or broken bones; dental damage; eye damage; cuts, wounds, scrapes, abrasions, and/or contusions; dehydration; oxygen shortage (anoxia); head, neck, and or spinal injuries; shock; paralysis and/or death.

These risks may be caused by falls, collisions and close contact with other participants and fixed objects, fatigue, psychological stress, equipment failure, and my/my child's sense of balance, physical coordination, and ability and willingness to follow instructions. Some participants experience an increased heart rate and other symptoms of anxiety and stress due to physical exertion, reliance on other participants, or a fear of heights.

All of the activities are voluntary.

It is the responsibility of the participant to limit his or her participation in any way he/she deems appropriate. Houle does not make a determination of a participant's fitness for an activity; rather, the participant represents to Houle and verifies that he/she is physically fit and ready for an activity, and that the activity is suitable for the participant.

The participant agrees to comply with all rules and directions made or given by Houle and its employees, volunteers, assistants and contractors in connection with the activity.

I am aware that Houle does not carry medical or dental insurance for the participant, and it is my responsibility to arrange for insurance for the participant as I see fit.

For the parent: I have discussed these risks with my child. My child understands and acknowledges these risks. My child also understands that he or she assumes these risks in the event he or she decides to participate in an activity.

Please read and complete page 2 of this form



**ACKNOWLEDGMENT OF RISK STATEMENT
AS A PARTICIPANT OR PARENT/GUARDIAN, I AGREE:**

In the event of an accident requiring medical attention at an activity supervised by Houle, I authorize Houle and its agents to render or seek emergency or first aid assistance for me/my child and to release medical information and incident reports to insurance providers and other persons or authorities deemed appropriate by Houle.

To the use of my/my child’s image in any photograph, video recording, or Web page of Houle.

Should any part of this acknowledgement be declared unenforceable by a court of competent jurisdiction, the remainder of this acknowledgement shall be in full force and effect.

Participant Name (PRINT) _____

(H) Phone (____) - ____ - _____ (C) Phone (____) - ____ - _____

Address _____

City _____ Province _____ Postal Code _____

Age _____ Gender _____

School Name/ Dry Grad Event: **Delta Secondary School 2019 Dry Grad**

Event Date: **Friday, May 31st into Saturday, June 1st 2019**

EMERGENCY CONTACT (PRINT) _____

(H) Phone (____) - ____ - _____ (C) Phone (____) - ____ - _____

By signing this document, I acknowledge that I have read and fully understand both pages of this document and that the information I have provided is disclosed accurately and truthfully.

I UNDERSTAND THAT PARTICIPATION IS AT ONE’S OWN RISK.

Participant Signature _____ DATE ____ / ____ / ____

Parent Signature _____ DATE ____ / ____ / ____

PARENT SIGNATURE REQUIRED IF PARTICIPANT IS UNDER NINETEEN (19) years of age.