

The All Night Grad Party

June 21, 2017

What is the All Night Grad Party (ANGP)?

- A fantastic party planned just for SENIORS
- THE BEST WAY TO SPEND GRADUATION NIGHT!!!!
- A safe, drug and alcohol free event created and sponsored by the Chantilly High School PTSA
- A great way to end the year with ALL your classmates

How do I sign up?

1. Print these forms and complete them.
2. Make a check payable to CHS PTSA ANGP (see cost section for proper amount).
3. Include the check and completed forms in an envelope and either bring to the main office or mail to:
CHS PTSA ANGP
4201 Stringfellow Road, Chantilly VA 20151
4. You can also pay online at www.chantillyhsptsa.org Click on "pay4schoolstuffonline".

What is the cost?

- \$60 now until March 31st
- \$80 from April 1st until June 20th for paper registrations (online registrations will be closed on June 16th)
- \$100 the day of the party (paid at the door)
- We want 100% attendance. Contact your counselor if you have special financial needs. The PTSA wants you to come and celebrate your achievement.

Top Reasons Why YOU need to attend

- Hang out with your friends all night
- Something for everyone: great prizes, games, entertainment, and food
- Everyone will be there!

ATTENDANCE GUIDELINES

The All Night Graduation Party (ANGP) is a safe, drug and alcohol free opportunity for our senior students to celebrate their graduations. The party will be held on Wednesday, June 21st, 2017 at Chantilly High School. The PTSA volunteers as well as everyone involved are making this the greatest party for our seniors. Here are a few reminders:

Reservation forms are available in the main office, student services, and the sub-school offices. Reservations can also be made online until midnight on June 16th. All forms must be complete for the student to enter the party. Students may come the night of, however, ALL FORMS MUST BE COMPLETED BY BOTH THE STUDENT AND PARENT/GUARDIAN. It is more expensive if the student comes to the door, so make the reservation now!

Come hungry and ready to have fun—the fee includes casino, food, games, PRIZES, and, entertainment. Participation in the ANGP is a PTSA School Sponsored event, and therefore, all the provisions in the Student Rights and Responsibilities (SR&Rs) apply.

1. **Who can attend**--Attendees MUST be 2017 graduates of CHS.
2. **When to submit all forms** -- All forms must be completed in entirety in order for students to attend the party.
3. **When should attendees arrive**--Check in of attendees begins at 11PM. Students should arrive no later than 12AM to join the fun. Graduates who arrive after midnight will not be admitted. In this case, the parent will be notified that the graduate arrived too late to attend the party and is returning home. If we have a ticket reservation and the student does not show at all, a call home will be made to confirm non-arrival. While this is an all night party, students may leave but only after they have checked in with security and a parent/guardian is notified of the student's return home. Parents/Guardians, please provide working phone numbers on the authorization forms.
4. **Refunds**--There are no refunds.
5. **What to bring to the party**--No need to bring a purse, bag or backpack. When you check in you will be given a bag for your things as well as prizes that you may earn during the party. The bag remains in the security room until you leave the party.
6. **No outside food or drink is permitted.**
7. **What to wear** --You will receive your official 2017 ANGP t-shirt at the senior breakfast, which takes place right after the MANDATORY graduation rehearsal. Your t-shirt is your entrance ticket and must be worn during the party. If you decide to pay at the door, there will be a limited supply of t-shirts.
8. Students are expected to behave appropriately and in a respectful manner, as stipulated by the Student Rights and Responsibilities (SR&Rs.) Any attendee behaving inappropriately will be asked to leave and the parent/guardian will be notified.
9. Students requiring medication and/or supplies must complete and return the MEDICAL AUTHORIZATION FORM.

If you have any questions please send them to angp@chantillyhsptsa.org

Parent Authorization and Acknowledgement of Risk
Chantilly High School 2017 All Night Graduation Party

By signing below, the graduate and their parent/guardian agree to the following:

- The ANGP is a PTSA, school-sponsored event. All the provisions in the Fairfax County Student Rights and Responsibilities (SR&Rs [2016-2017 Student Rights and Responsibilities](#)) apply to the event.
- The graduate and their parent/guardian are responsible for the graduate's actions.
- We have read and agree to the attached attendance guidelines.
- The parent/guardian and graduate agree to respect and accept the decision made by the ANGP committee and its volunteers regarding any actions pertaining to the graduate and the attendance rules.
- The parent/guardian MUST be available by phone throughout the night.
- A graduate suspected of being intoxicated by alcohol or drugs or smells of alcohol or drugs during check in will NOT be allowed to attend the event. If a graduate is suspected of intoxication during the event, he/she will be removed. In the event of such an issue, the student will be held in a separate area and CHS security personnel (including safety resource officers on duty) will be notified. The parent/guardian will be asked to pick up the graduate and transport him/her home. The graduate WILL NOT BE ALLOWED TO DRIVE HIMSELF/HERSELF HOME and will be held until the parent/guardian arrives.
- Any graduate who causes a disturbance during the event will be asked to leave. Disturbances include physical fighting, yelling angrily at another graduate or adult in attendance, stealing, improper touching as defined by the SR&Rs, and any destruction of property. The parent/guardian of the graduate will be asked to pick up the student and take him/her home.

We, the undersigned, hereby release and agree to hold the Chantilly High School PTSA, the 2017 ANGP Committee and its volunteers, employees, and other officers, staff members, and agents blameless from any and all claims that may arise from my use and/or my child's use or presence on and at such premises and activities. To the best of our knowledge, the graduate/my child is physically able to safely participate in this celebration and all of its activities.

Student Name (Printed)	Student Signature	Date
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Student Address: _____

Student Email: _____

Student Telephone: _____

T-shirt Size (pick one): S M L XL XXL

Parent/guardian Name (Printed)	Parent/Guardian Signature*	Date
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Parent Address: _____

Parent Email: _____

Parent Telephone: _____

Interested in Volunteering? (check one) Y_____ N_____

*Parents/Guardians must sign even if the graduate is 18 years of age or older.

EMERGENCY CARE INFORMATION AND MEDICAL AUTHORIZATION
CHS2017 ALL NIGHT GRADUATION PARTY

In the case of an emergency, volunteers staffing the party will call 911. Every effort will be made to contact a parent, a guardian, or a designated emergency contact. All information below is MANDATORY.

STUDENT NAME: _____

IN CASE OF EMERGENCY DURING THE ANGP, CONTACT:

Printed Parent/Guardian

Name(s): _____

Home Phone Number: _____ Cell Phone Number: _____

LIST TWO (2) PERSONS WE SHOULD CALL IN AN EMERGENCY IF THE PARENT(S)/GUARDIANS CANNOT BE REACHED:

Contact Name: _____ Phone Number: _____

Contact Name: _____ Phone Number: _____

INSURANCE INFORMATION

My child has medical coverage with _____ (insurance carrier)

Please indicate all current health conditions that apply for your child. Write NA if there are none.

Allergies: Please list ALL allergies your child has. If your child is "allergy free" write NA.

Please list all medications and dosages that your child receives on a continual basis. Write NA if there are none.

Printed Parent/Guardian Name

Parent/Guardian Signature*

Date

*Parents must sign even if graduate is 18 years of age or older.

COMPLETE THIS SECTION OF THE FORM ONLY IF YOUR CHILD WILL BE CARRYING MEDICATION DURING THE PARTY

Due to medical necessity, I do hereby give my permission for my child _____, to keep on his/her person at all times for the duration of the All Night Graduation Party celebration and to self administer the following medication(s) and/or medical supplies/equipment that are listed below.

Please be as specific as possible when listing. For medications, include dosages and times to be taken.

1. _____
2. _____
3. _____
4. _____*
5. _____

I hereby release and agree to hold the Chantilly High School PTSA, the 2017 ANGP Committee and its volunteers, employees, and any of the officers, staff members, and agents blameless from any lawsuits, claims, expenses, demands or actions, etc. against them for permitting my child to carry and self administer the above mentioned medications and/or medical supplies/equipment for which I have given permission.

Printed Parent/Guardian Name

Parent/Guardian Signature*

Date

*Parents must sign even if graduate is 18 years of age or older.