## AFTER PROM ADMISSION/PERMISSION FORM

All After Prom attendees MUST complete, submit and pay by April 8, 2013.

All CCHS Juniors and Seniors are invited to attend and are welcome, even if they decide not to attend the CCHS Prom. Each student is allowed to bring a guest. Each attendee must complete this form. Registration cost is \$12.00/per person. Admission is all inclusive! Snacks, food, drinks, inflatables, games and any and all activities are included in the price of the ticket! Attendees will also receive a t-shirt.

Prom webpage noted below or use the After-link found on the school website or at the for more information regarding activit <a href="http://cchs-afterprom.weebly.com">http://cchs-afterprom.weebly.com</a>

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Juniors/Seniors: Co	ost \$12						Г	
Name:					_	Senior	J.	unior
T-Shirt Size	S	M	L CIRCLE	XL	2XL			
Attending Prom wi	th CCH	S Senior/	/Junior Stud	ent: Cost	t \$12			
Guest Name:				_	_			
T-Shirt Size	S	M	L CIRCLE	XL	2XL	CCHS Freshmen/Sopho		Guest
Center entrance. The parents informed by  Please provide a nan will call this number 12:45 a.m.	telephon ne and ph	ne. hone num	nber where you	our parent	can be reach m. and will a	ned during After Propalsion call if a registere	om in case o	of an emergency. We
Parent Name:					_ '	Phone #		
RELEASE OF LIABILITY								
We understand that "CCHS" Junior class parents are sponsoring the 2013 After Prom Event for all Juniors and Seniors and their guests. We also understand that entertainment has been provided which will include activities/games of risk. We also understand that the attendee will be able to participate in other events as provided by the Activities Committee. We release the volunteers and the Central City Public School System from any liability issues and give permission for the above registrant to participate in After Prom Event to be held at Performing Arts Center & Central City Middle School starting 12:45 and ending after the Grand Prize announcements at 4:00 a.m. on April 14th.  Student  Parent/Guardian  Signature:								
Signature:	ure: Signature:							
OFFICE USE ONLY								
Date Received:						Payment Amount Recei	ivod:	