

2015 DRHS Post Prom Event Permission Form

Please return this completed form to the high school office **NO LATER THAN April 10th**. We must have the form at the time your child registers to attend the post prom event. *(All non-DRHS dates must also have a permission form signed by their parent or guardian to attend Post Prom.)*

STUDENT PERMISSION:

I give my son/daughter, _____, permission to attend the post prom event on April 18, 2015. It is expressly understood that in the event my son/daughter is involved in any inappropriate activity, the chaperones have my permission to intervene to restrict those behaviors. In that event I will be contacted.

MEDICAL RELEASE:

I give my permission for my son/daughter, _____, to receive emergency medical treatment at the discretion of the DRHS Post Prom chaperones. I understand that I will be notified as soon as possible of any emergency medical condition that should arise.

Please indicate if your child has any specific medical issues that the chaperones should be made aware of: _____

_____ (parent/guardian signature) _____ (date)

_____ (parent/guardian printed name)

_____ (student printed name)

Phone number you can be reached at on the night of Prom, April 18th

(____) _____
