

AFTER PROM PERMISSION SLIP

We the undersigned have read and understand, and do hereby agree to the attendance and the arrival/departure policy as outlined in the After-Prom permission notice. I, the undersigned Parent/Guardian, grant permission for my child (student), as identified below, to attend the KHS After-Prom party being held at Altitude Trampoline Park immediately following the May 12, 2018 Prom.

The undersigned Parent/Guardian and student hereby release, waive, agree not-to-sue, indemnify, defend and hold harmless Keystone Local school district, the KHS After Prom committee, Event Sponsors, Event volunteers, Event workers, and any and all successors, administrators, directors, trustees, teachers, employees, agents and representatives of the foregoing, from all present and future claims that may be made by me, all members of my family, estate, executor, administrator, heirs or assigns for property damage, personal injury or wrongful death caused by the actions or omissions of the parties listed above, wherever, whenever or however the same may occur as a result of my attendance and/or observation of this Event.

WE UNDERSTAND AND AGREE THAT THE RELEASEES ARE NOT RESPONSIBLE FOR ANY DEATH, INJURY, OR PROPERTY DAMAGE ARISING OUT OF MY ATTENDANCE AND/OR OBSERVATION OF THIS EVENT, EVEN IF CAUSED BY THEIR OWN NEGLIGENCE.

The undersigned Parent/Guardian may be reached at the below listed telephone number between the hours of 12:00 am and 2:30 am.

If student is not a KHS Junior or Senior student or is a minor-aged child attending the event as a guest of a KHS Junior or Senior student, the undersigned agree that the permission and all of the waivers, releases and other obligations set forth herein shall apply.

Furthermore, the undersigned Parent/Guardian agrees that it is such Parent/Guardian's responsibility to pick up the Student/Guest if the Student/Guest desires to leave the Event before it is over.

We understand that this document is intended to be as broad and inclusive as permitted by the laws of the State of Ohio and agree that if any portion of this agreement is invalid, the remainder will continue in full legal force and effect.

WE HAVE READ AND UNDERSTAND THE TERMS OF THE ABOVE AGREEMENT, WILL COMPLY WITH THE TERMS HEREOF AND ACKNOWLEDGE THAT WE ARE GIVING UP LEGAL RIGHTS.

Print Name of Student/Guest: _____

Signature of Student/Guest: _____

Print Name of Parent/Guardian: _____

Telephone Number of Parent/Guardian: _____

Signature of Parent/Guardian: _____ Date: _____