

Student Last Name \_\_\_\_\_ First Name \_\_\_\_\_



# SENIOR ALL NIGHT PARTY CLASS OF 2023

## STUDENT & PARENT CONSENT FORM

### Parents:

I give permission for my child to participate in the Senior All Night Party celebration on Sunday, June 4, 2023. The event takes place at Mercy High School, 29300 W Eleven Mile Rd, Farmington Hills, MI 48336. **Student arrival is between 10pm and 11pm. Doors will lock promptly at 11pm. The event will conclude at 5am the next morning, 6/5/23, and students will be released at this time. No one will be permitted to enter or leave the event between 11pm and 5am. To ensure the safety of the students, we STRONGLY encourage them to get a ride to and from the party. Students will NOT be allowed to keep their phones on them during the Senior All Night Party. You will not be able to reach your daughter directly.** In case of emergency, you can contact the SANP Chairs the night of the event: Leslie Ahmad at 248-961-4484 or Katy Jallad at 248-840-4558.

Student Name: \_\_\_\_\_ Birthdate (MM/DD/YY): \_\_\_\_\_

In consideration of my child being allowed to participate in this event, I agree to indemnify and hold harmless Mercy High School and all affiliated organizations, its/their employees, agents, representatives, and volunteers from all claims I or my child may have, excluding claims for intentional misconduct or gross negligence arising from or relating to my child's participation in this event.

\_\_\_\_\_ (Initial) I authorize Mercy High School to obtain necessary medical treatment for my child in case of illness, injury, or accident, including transport to the nearest emergency room accompanied by a SANP First Aid Parent.

\_\_\_\_\_ (Initial) I authorize Mercy High School to administer any needed over-the-counter medications necessary for my child in case of illness, injury, or accident, including, but not limited to, cough drops, Tylenol (acetaminophen) Aleve (naproxen) and/or ibuprofen for headaches, coughs, etc.

\_\_\_\_\_ (Initial) I authorize my daughter to either drive herself home, drive home with another parent, or drive home with another student after the conclusion of the event on June 5<sup>th</sup>, 2023, at 5am.

\_\_\_\_\_ (Initial) I have submitted a completed the required SANP Medical/First Aid Information form.

### Students:

I understand and agree that NO DRUGS, ALCOHOL, TOBACCO, OR VAPING MATERIALS ARE ALLOWED ON THE PREMISES. THE MERCY HANDBOOK REGULATIONS WILL BE IN EFFECT, and I will adhere to this code of conduct.

I, \_\_\_\_\_, a student at Mercy High School agree to abide by the school code of conduct as stated in the school handbook.

\_\_\_\_\_  
Print Parent's Name

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Mobile Phone

\_\_\_\_\_  
Print Student's Name

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Mobile Phone

Seniors must turn in Consent Form and Medical/First Aid Form to the SANP box located at the school reception desk, no later than Friday, May 12, 2023