

DSS Dry Grad 2024



Registration Information

Dry Grad is an event which provides students with a safe, drug and alcohol-free environment to celebrate their graduation. It is a fully supervised event sponsored, fundraised, and organized by parents. A place where graduates can have fun with their friends, win prizes, be entertained, and participate in a fun-filled, action-packed night of celebration.

WE NEED YOU! To make this event successful, we need parent volunteers! visit: dssdrygrad.com/volunteer We will communicate with all families when the opportunities are posted

The day's events cost approximately \$200-250 per student, however, due to fundraising efforts throughout the school year and the countless hours of volunteer parent time, the cost to students is only \$125. This payment includes entrance to the event (featuring non-alcoholic beverages, foods, games, prizes, and entertainment) and a commemorative T-shirt. To help with fundraising efforts, if you are able to support the grad class in a more significant way, please consider adding an additional donation amount to your ticket purchase.

Early bird prize:

Please purchase your tickets as soon as possible to cover the incoming costs.. As a special incentive, we have an early bird prize for everyone who pays prior to February 7, 2024, a chance to win **4 Front Row seats for the May 31 , 2024 Red Carpet Grad Walk**

Dry Grad Registration Package

Graduates must complete the following forms, and return them to the school as soon as possible:

1. DSS Dry Grad Registration Form
2. DSS Dry Grad 2024 Waiver
3. Houle Grad 2024 Waiver

Payment can be made by e-transfer or cheque:

1. **E-transfer:** send to treasurer@dssdrygrad.com
 - a. Use the question: **What year do they graduate?** Answer: **2024**
 - b. Be sure to include your graduate's **first and last name** in the message
2. **Cheque:** Make cheques payable to "DELTA SECONDARY DRY GRAD"

Attach your completed forms above and drop off into the box located in the school office, or mail to: Delta Secondary School, 4615-51 St. Delta, BC V4K 2V8

Be sure to include your graduate's full name on the envelope for drop off.

*No information contained in the forms will be shared outside of the Dry Grad Executive Committee.
All fields must be completed*

DSS Dry Grad 2024



Registration Form

Complete this form and send it with payment to the school as soon as possible. All grads **MUST** be registered in advance to attend.

Student Name: _____ Student Phone: _____

Address: _____

Parent/Guardian Name(s): _____

Parent Cell # _____ Parent Email: _____

Contact name and number(s) for the night of Friday May 31, 2024 during the Dry Grad Event.

Name: _____ Number: _____

Medical Concerns (allergies etc): _____

Food Restrictions: _____

DSS Dry Grad T-Shirt adult size: (circle): **S M L XL XXL**

I hereby give permission for _____ to participate in all activities provided at the DSS 2024 Dry Grad at their own discretion. I will not hold any DSS 2024 Dry Grad Committee member or event volunteer responsible for any harm that may come to my child as a result of this event.

X _____

Parent/Guardian signature

I have read and agree to adhere to the rules on the attached DSS Dry Grad 2024 Waiver.

X _____

Student signature

Contribution Fee*: \$125 or \$ _____

*The ticket price is \$125/child. . However, if you are able to support the grad class in a more significant way please choose an alternative amount.

Cheque # attached _____ or E-transfer completed on _____

*No information contained in this form will be shared outside of the Dry Grad Executive Committee.
All fields must be completed*



DSS Dry Grad and Grad Walk 2024 Waiver Form

All Dry Grad Students and Parents must sign this waiver in order for the student to receive a ticket to the event.

The intention of this waiver is to ensure that all DRY GRAD student attendees experience a fun, respectful and safe series of events during this 2024 Dry Grad Celebration.

I, (student-print your full name) * _____ agree to adhere to the following SIX (6) Grad Walk & Dry Grad expectations:

1. I will not attend the 2024 Grad Walk or Dry Grad event while under the influence of, or be in the possession of ALCOHOL or DRUGS.
2. I agree to arrive at the Dry Grad event between 10:45 pm and 11:45 pm. I understand the doors will be closed at 11:45 pm and I cannot enter after that time.
3. I agree that I will not be allowed back to re-enter Dry Grad once I leave the event (*see note below*)
4. I understand that my entrance into DRY GRAD is not guaranteed if I am found in possession of, or under the influence of ALCOHOL or DRUGS and that my parents/guardians will be called to pick me up.
5. I understand that if I choose to leave prior to 4:00 am that a parent/guardian will have to be contacted and that arrangements for transportation must be made. (We have an agreement with the Corporation of Delta that we will not release and students directly onto the street prior to 4:00 am)
6. I understand that I must be present at the Ladner Community Centre to claim ANY prizes.
Note: Special arrangements, under special circumstances may be made for entry and re-entry by attaching a letter of request signed by a parent and submitting it with this waiver. This request is not guaranteed until approved.

This waiver must be signed by both the student and parent and returned on or before the time of picking up the Dry Grad entrance package..

*STUDENT SIGNATURE: _____

*PARENT/GUARDIAN SIGNATURE: _____

*PARENT/GUARDIAN: Phone number you can be reached at during the Dry Grad event
Phone : _____

I have the following special needs request related to the Dry Grad Event.

*No information contained in this form will be shared outside of the Dry Grad Committee.
All fields must be completed.*



#29 - 1833 Coast Meridian Rd, Port Coquitlam, B.C. Canada V3C 6G5 Phone (604) 474-0359 Fax (604) 474-0379

ACKNOWLEDGMENT OF RISK STATEMENT

In consideration of Houle Games and Entertainment Ltd. (hereafter "Houle") allowing me/my child to participate in its activities:

AS A PARTICIPANT OR PARENT/GUARDIAN, I UNDERSTAND AND ACKNOWLEDGE THAT:

Houle provides equipment for activities including but not limited to Mechanical Bull Ride, Kids Bouncers and Slides, Inflatable Games, Carnival and Picnic Games, Casino Rentals, Arcade and Video Games, Sports Simulation Games, Laser Tag, Sports Bar Style Table Games, Money Booth and Photo Booth Rentals, Specialty Artists and Entertainers, Music Services (referred to herein as "activity"). More information on the activities can be found on our website at www.houlegames.com.

Participation in an activity entails known and unanticipated risks that could result in physical or emotional injury or damages to me/my child, to property, or to third parties. Such risk cannot be eliminated without jeopardizing the essential qualities of the activities.

The risks of these activities include but are not limited to sprains, torn muscles and/or ligaments; fracture or broken bones; dental damage; eye damage; cuts, wounds, scrapes, abrasions, and/or contusions; dehydration; oxygen shortage (anoxia); head, neck, and or spinal injuries; shock; paralysis and/or death.

These risks may be caused by falls, collisions and close contact with other participants and fixed objects, fatigue, psychological stress, equipment failure, and my/my child's sense of balance, physical coordination, and ability and willingness to follow instructions. Some participants experience an increased heart rate and other symptoms of anxiety and stress due to physical exertion, reliance on other participants, or a fear of heights.

All of the activities are voluntary.

It is the responsibility of the participant to limit his or her participation in any way he/she deems appropriate. Houle does not make a determination of a participant's fitness for an activity; rather, the participant represents to Houle and verifies that he/she is physically fit and ready for an activity, and that the activity is suitable for the participant.

The participant agrees to comply with all rules and directions made or given by Houle and its employees, volunteers, assistants and contractors in connection with the activity. I am aware that Houle does not carry medical or dental insurance for the participant, and it is my responsibility to arrange for insurance for the participant as I see fit.

For the parent: I have discussed these risks with my child. My child understands and acknowledges these risks. My child also understands that he or she assumes these risks in the event he or she decides to participate in an activity.

Please read and complete page 2 of this form



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ACKNOWLEDGMENT OF RISK STATEMENT AS A PARTICIPANT OR PARENT/GUARDIAN, I AGREE:

In the event of an accident requiring medical attention at an activity supervised by Houle, I authorize Houle and its agents to render or seek emergency or first aid assistance for me/my child and to release medical information and incident reports to insurance providers and other persons or authorities deemed appropriate by Houle.

To the use of my/my child's image in any photograph, video recording, or Web page of Houle.

Should any part of this acknowledgement be declared unenforceable by a court of competent jurisdiction, the remainder of this acknowledgement shall be in full force and effect.

Participant Name (PRINT) _____

(H) Phone (____) - ____ - ____ (C) Phone (____) - ____ - ____

Address _____ City _____

Province _____ Postal Code _____ Age _____ Gender _____

Booking/Organization Name: **Delta Secondary School**

Invoice Title: **2024DeltaSecondary0531E**

Event Date: **Friday May 31st 2024**

EMERGENCY CONTACT (PRINT) _____

(H) Phone (____) - ____ - ____ (C) Phone (____) - ____ - ____

By signing this document, I acknowledge that I have read and fully understand both pages of this document and that the information I have provided is disclosed accurately and truthfully.

I UNDERSTAND THAT PARTICIPATION IS AT ONE'S OWN RISK.

Participant Signature _____ DATE ____/____/____

Parent Signature _____ DATE ____/____/____

PARENT SIGNATURE REQUIRED IF PARTICIPANT IS UNDER NINETEEN (19) years of age.