

**Woodford County Project Graduation - Student Registration & Commitment Contract (Please Print)**

Student's Name: \_\_\_\_\_  
Parent's/Guardian Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Home Phone #: \_\_\_\_\_ Student Cell#: \_\_\_\_\_  
Parent Email: \_\_\_\_\_ Shirt Size: S M L XL XXL XXXL (Circle One)

**Commitment Contract:**

- I, \_\_\_\_\_, plan to attend Woodford County Project Graduation (Event) at Falling Springs Arts & Recreation Center (FSARC). By signing this Commitment Contract my parent/guardian and I acknowledge that we have read, understand and agree to abide by the following rules:
1. This Commitment Contract must be completed, signed by the student and the parent, and submitted prior to the event. No student will be admitted without a contract on file.  
**Picture ID is required for admittance.**
  2. Project Graduation is a drug-, alcohol-, and tobacco-free environment. I will not be admitted if it is suspected that I have already consumed drugs or alcohol. My use of any of these products during the event will result in my immediate removal and a phone call will be made to my parent/guardian. Law enforcement officials will be on site to deal with inappropriate behavior or violation of the law.
  3. I will respect the event site and do no malicious damage. I understand that, in the event of my inappropriate behavior, I may be asked to leave the event and agree that, if asked to leave, I will do so. Any violation will be dealt with in accordance with the law. My parent/guardian will be contacted to pick me up.
  4. I understand that once I check in at FSARC between 10:00 PM and 11:00 PM, I cannot leave the building on my own until the event is over at approximately 6:00 AM the following morning.
  5. I understand that if I decide to leave FSARC on my own, my parent/guardian will be contacted and must pick me up at FSARC. Students will be released only to their parent/guardian. If I leave, I cannot re-enter.
  6. No backpacks, book bags, handbags, or electronic devices (including cell phones) will be allowed beyond the check-in point. Such items will be relinquished at the registration tables, identified as property of this student, kept in a secure area and returned to the student at the end of the event.
  7. Appropriate clothes must be worn at all times - shirts & shoes required. FSARC requires tennis shoes in gym. Bring swim suit & towel for pool games - they will be stored in secure area with the other personal items.
  8. Anyone attending acknowledges and agrees to allow any photos or videos taken during the Event to be used for project purposes. Further, I hereby agree and give permission for photos or videos to be printed and/or uploaded to Facebook, Instagram, Twitter and other social media networks.
  9. I hereby release and agree to hold harmless Woodford County Project Graduation and its officers, chairmen, directors, volunteers, employees and agents from any and all claims that may arise from the use or presence on and at FSARC and any or all activities provided for the Event.

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**PARENT CONSENT:** I hereby give my permission for \_\_\_\_\_ to participate in Woodford County Project Graduation. I understand and agree to the above conditions for his/her participation. Should he/she not check in by 11:00 PM, I understand that I will be notified. Should he/she violate any of these conditions, I understand that I will be contacted and that he/she may be asked to leave the event. If he/she is asked to leave, I agree to pick him/her up from FSARC.

**ALL STUDENTS MUST HAVE A PARENT'S SIGNATURE.**

**During the celebration I can be reached by phone at** \_\_\_\_\_ **or** \_\_\_\_\_

**Parent/Guardian Signature :** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Emergency & Insurance Info:** In case of emergency, hospital preference: \_\_\_\_\_

**Physician name and phone#:** \_\_\_\_\_

**Insurance carrier and contract number:** \_\_\_\_\_

**Drug and/or food Allergies:** \_\_\_\_\_

**\*Commitment Contract must be FULLY completed, signed and returned by May 12, 2017**

**\*\*Contracts-Drop in WCHS main office OR mail to WCHS Proj Grad, 180 Frankfort St VersaillesKY40383**

What college will you attend? \_\_\_\_\_