***Project Graduation Liability Release Form***

I give my child permission to participate in 2015’s Project Graduation and events. Neither my child nor I will hold Project Graduation committee/parents, DeKalb County High School/employees or F.A.D.D.S. Entertainment/employees liable for any injuries, sickness, lost/stolen items, or for any other reasons.

Check in time is 11:00 pm-12:00 am and the event will last until 6:00 am the following morning. If you leave during this time, then you will forfeit any gifts/money you were going to receive.

***\*\*\* Release Form due April 22nd 2015. Turn forms in to Mrs. Rhonda Merriman in the guidance office.***

\*\*\* If you have any questions please contact Judith. Hale 615-597-8344***or*** 61S-464-7810

YES I would like to be a chaperone for this event:

Name: Phone #

Parent’s Signature Date

Participant’s Signature Date

SUBSCRIBED AND SWORN TO BEFOR ME THIS DAY OF

Notary Public Name

Notary Signature

Notary Public for the State of

Residing at

Commission Expiration