

AIEA PROJECT GRADUATION 2010

FORM #1 - REGISTRATION

Dear Seniors,

Congratulations! You are in the final stretch of your high school years. Shortly, you will be celebrating graduation day with your fellow classmates. Wouldn't it be great to cap off this special day with a drug/alcohol free, fun-filled, prizes and food galore event? Project Grad 2010 will be that **EXCLAMATION POINT (!)** to end your senior year. If you are interested in attending Project Grad 2010, please fill out the attached forms and return them with your payment to the **Aiea High School Registrar's Office**.

DATE / TIME

Friday, May 28, 2010 (time to be determined) to
 Saturday, May 29, 2010 7:00 AM
TRANSPORTATION: DOE approved buses

COST/PAYMENT, IF PAID BY

August 4, 2009 - January 30, 2010	\$125.00
February 1 - April 30, 2010	\$150.00
May 1 - 28, 2010	\$200.00
May 17 - 28, 2010 CASH ONLY**	\$200.00

CHAPERONES: Administrators, faculty, staff and parents

**Memorabilia NOT guaranteed and only if space is available!

Make all checks payable to:

AIEA PROJECT GRAD

Turn in all forms and payments to:
 AIEA HIGH SCHOOL'S REGISTRAR

STUDENT INFORMATION

LAST NAME: _____ FIRST NAME: _____ Middle Initial _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE #s HOME: _____ CELL: _____ EMAIL Address _____

T SHIRT SIZE: SMALL MED LARGE X-LARGE XX LARGE
 Adult Sizes Only

SHORT SIZE: SMALL MED LARGE X-LARGE XX LARGE
 Unisex Waist Size (28-30) (32-34) (36-38) (40-42) (44-46)

MEN SHOE SIZE: _____ WOMEN SHOE SIZE: _____

STUDENT AGREEMENT

I, _____, am aware that alcohol, tobacco and drugs are NOT permitted at the Project Graduation Celebration. If I am found possessing, using, and/or under the influence of any of these substances, I understand that my parent(s) or guardian(s) will be notified and I will be denied participation in the activities and immediately sent home.

I understand that photos and videos will be taken at the party, will become the property of the Parent PG Committee and may be used in various media (brochures, program description, recruitment, etc.). I consent and authorize the use of photographs of me without compensation by any members of the PG Committee.

I also understand that I shall not be allowed to drive to and from the PG event due to the nature of the program and the fatigue factor involved with driving. My parents/guardian will make arrangements for me to be dropped off and picked up from PG.

I have read and agree to comply with the above terms

STUDENT NAME (PRINT) _____

STUDENT SIGNATURE _____

FOR APG USE ONLY	
Date Received:	
Bank Name/Check No.	
Amount Paid:	
Receipt No.	