

It's hard to believe how quickly the year is going! Our children will soon be graduating, and attending their final kick-off party, known as Project Graduation ("PG"), with all of their classmates. The graduation will be at 7pm, followed by a small reception at BCA. The graduates will then change into casual clothes that are comfortable for the PG party, and then board the busses that will be waiting outside BCA. The busses will arrive at 9 pm, and depart at 9:30 for the undisclosed location where they will spend a chaperoned, alcohol and drug-free night in a safe and fun environment with all of their friends. It is a special night for all of them, and the last time they will all be together in one place. Parents will be expected to pick up the children in the BCA parking lot at approximately 5:30 am the following morning of the 26th.

Please note that no cars will be permitted to be left at FDU/BCA, therefore, all students must be dropped off following graduation, and must be picked up in the morning. No student will be allowed to drive home by him/herself. This is a safety precaution as the students will not be sleeping all night.

Attire for the evening is casual/comfortable. The evenings can be chilly so all graduates should dress appropriately, and should bring attire appropriate for spending some time outdoors. Backpacks are not permitted. Students should not bring any valuables or money as they will not be necessary and there will be no place to store them. We are discouraging small handbags as well; they will be allowed, however, if they are needed for personal items. Please note chaperones will be checking these handbags.

The event is funded solely by the parents of the graduates, and we receive no financial assistance from the school, the class fund, the PPO, or any organization within the school. The cost to attend Project Graduation is \$225.

Please send the check for \$225 made out to "Academy PPO," and write in the memo section, "PG 2019," to reserve your child's spot at Project Graduation 2019. You will also need to print the three (3) attached forms, complete them, and send them with your check by April 30th. (Please note that if you have already sent in the check for \$225, you still need to print and send in the three (3) following forms):

- (1) Permission for Overnight Trip & Medical Treatment Consent Form
- (2) Code of Honor Agreement
- (3) Parent/Guardian and Student Waiver/Release/Assumption of Risk/Indemnification Agreement

Please return these forms, along with the \$225 check, by April 30th in an envelope addressed to:

Wendy Saks, 64 Twin Brooks Rd., Saddle River, NJ 07458



#### FORM #1 PERMISSION FOR OVERNIGHT TRIP AND MEDICAL TREATMENT CONSENT FORM

Please Print Clearly		
GRADUATING STUDENT		
	FIRST NAME:	
	SHIRT SIZE:	
(XS= Adult Extra Small; S=Adult Sm	all; M=Adult Medium; L=Adult Large	e; XL Adult Extra Large)
PARENT'S INFORMATION		
	PARENT'S FIRST NAME:_	
PARENT'S CELL PHONE:	PARENT'S HOME PHONE	
Policy Holder:		
ID Number:		
Authorization to Dispense Medicat		
	Dosage:	
Medication:	Dosage:	
Medications should be in the origin	nal packaging and placed in a zip loc	k bag with the student's name
and brought with the student to Pro	oject Graduation, and kept in the stu	ident's possession in case of
emergency.		
parent/guardian cannot be contact during BCA Project Graduation 201 Academy Parent Partnership Organ employees, volunteers and chaper for the transportation of the studer releases as required to obtain imm of the medical authorities at said far Furthermore, the student listed be	nt and parent/guardians agree hereved in the event of a medical emerge 19, the undersigned hereby grants funization, a NJ Non Profit Corporation ones for the BCA Project Graduation at to a facility for emergency medical ediate medical and/or surgical treat acility.  Iow has parent/guardian's permission ones with the rules and guidelines list	ncy, occurring at any time all power of attorney to the a, and its agents, servants, a 2019 to do as follows: arranged treatment and to sign such ment at the recommendation on to participate fully in BCA
Agreement. Parent/Guardian und	erstands that parent volunteers will nold trip chaperones or other volunt	supervise my student on this
Parent/Guardian Signature:		Date:
Parent/Guardian (Print Name):_		
Student Signature:		Date:
Student (Print Name):		



### FORM #2 CODE OF HONOR AGREEMENT

- I agree to strictly observe the rules set by any chaperone and the host facility for Project Graduation. When I am in doubt, I will seek approval from a chaperone.
- I am not permitted to have on my person, or use, any controlled substances (cigarette, vape, liquor, beer, wine, drugs, pot (or any form thereof). Prescription medication, including EpiPens, must be registered on the parent permission slip.
- I accept responsibility to act as a student ambassador at all times and understand that I represent
  the BCA community at all times. Appropriate behavior will be demonstrated at all times, and I
  further understand that all school rules apply while on this trip.
- I will not leave the site of Project Graduation for any reason, other than when I board the bus at the end of the event.
- I will maintain complete respect for all chaperones, personnel, staff and property of the Project Graduation site.
- I understand student/private vehicles are prohibited on this trip and the sole means of transportation is by the buses provided by Project Graduation.
- Backpacks, handbags and other bags are not permitted, except for small handbags with personal items (and such small handbags will be searched by the chaperones). There is no need to bring valuables or money.
- I understand the above rules, regulations and guidelines are only part of my obligation to act responsibly. I understand further that the rules and regulations listed in the Academy Student Handbook apply.
- I understand that any infraction of the above rules, regulations and guidelines will result in my
  immediate dismissal from the event, and my parents will be immediately called and required to
  pick me up from such event. Parents who sign below understand their responsibility to adhere to
  this agreement.
- Signing below indicates that you have read and understand the BCA Project Graduation 2019 rules and guidelines set forth above and agree to abide by and respect them.

Student Name:		
Student Signature:		
Student Cell Phone:		
Parent Name:		
Parent Signature:		
Home Phone:	Parent Cell Phone:	



#### **FORM #3**

BERGEN COUNTY ACADEMIES PARENT/GUARDIAN AND STUDENT WAIVER/RELEASE/ASSUMPTION OF RISK/INDEMNIFICATION AGREEMENT FOR BCA PROJECT GRADUATION 2019

In consideration of participating in any way in BCA Project Graduation 2019, the undersigned, parent/guardian and student both individually and jointly:

- Agree that (Student's Name) \_\_\_\_\_\_\_ is a graduating student, and intends to participate in the Project Graduation Party, beginning on Tuesday, June 25th, 2019, and ending the morning of June 26th, 2019.
- Understand that all participants will leave from the BCA Parking Lot at approximately 9:30pm, will be under the supervision of adult chaperones and travel by private commercial bus to a private commercial venue.
- Understand that all participants will return to Bergen County Academies under the supervision of adult chaperones and traveling by private commercial bus early Wednesday, June 26th, 2019, at approximately 5:30 a.m. in the morning.
- Hereby irrevocably and unconditionally agree to indemnify, defend, protect, and hold harmless the Academy Parent Partnership Organization, A New Jersey Non Profit Corporation, its members, employees, agents and representatives, and all private persons or organizations volunteering services without charge to chaperone graduates while participating in BCA Project Graduation 2019 ("Indemnified/Released Persons"), from any and all claims, losses, and liabilities arising out of or connected with, directly or indirectly, student's participation in Project Graduation 2019, including, but not limited to personal injury, property damage, court costs, attorney fees, damages, interest, however caused, arising from or relating to the graduating student participating in any and all activities relating to BCA Project Graduation 2019.
- Agree to release, waiver, discharge and covenant not to sue, the Indemnified Persons from any
  and all claims, demands, losses or damages on account of any injury, including personal injury or
  damage to property, arising from or relating to the graduate participating in any and all activities
  relating to BCA Project Graduation 2019

I/WE HAVE READ THE ABOVE AGREEMENT AND UNDERSTAND THAT I/WE GIVE UP CERTAIN RIGHTS BY VOLUNTARILY SIGNING IT AND I/WE NEVERTHELESS DO SO.

Student Printed Name:		
Student Signature:	Date:	
Parent/Legal Guardian Printed Name:		
Parent/Legal Guardian Signature*:	Date:	

\*All students are required to have a parent or legal guardian sign this waiver, regardless of the student's age.

Please return all forms to: Wendy Saks, 64 Twin Brooks Rd., Saddle River, NJ 07458