



Charles P. Allen High School

Prom 2017 Contract

Student's Full Name _____

Please Print (First and Last Name)

*Charles P. Allen High School Prom
Friday, May 26, 2017 6:30-11 pm
Halifax Marriott Harbourfront Hotel*

In purchasing my ticket for the Charles P. Allen High School Prom, I am aware and agree to the following:

1. This is a chemical free event. Smoking, vaping, drugs, and alcohol are not permitted.
2. Any person(s), regardless of legal age, shall not be in possession of or under the influence of, drugs or alcohol including cigarettes and vaping. The Halifax Police, security guards and the prom chaperones will enforce and address alcohol, tobacco and drug related matters, and/or behavioral problems. Charges may be laid at the discretion of the Police Officer on duty. That person will be required to leave immediately with a parent with no refund and school consequences (as per the Student Code of Conduct) will be enforced.
3. All bags and purses will be checked upon entrance to the prom.
4. Students cannot leave the designated areas once entering the Halifax Marriott Harbourfront.
5. Students who leave the Prom are not permitted to return for any reason. Charles P. Allen High School and its staff are not responsible or liable for any students once they have left the Halifax Marriott Harbourfront.
6. All sign-in guests must be pre-approved by their school administration and CPA School Administration. Non CPA guests may be interviewed by school administration prior to acceptance. All sign-in guests must also sign this Prom contract.

Parents/guardians are to arrange pick up of students at 11:00 pm at the Halifax Marriott Harbourfront.

**A ticket can be purchased only upon receipt of this document, signed by all parties.
Your signature represents your acceptance of these regulations.**

Please submit this form in full no later than WEDNESDAY, APRIL 26 in the main office

FOR CPA GRADUATE ONLY

Name of CPA Graduate _____

Name of Guest _____

If bringing a guest, please check which applies:

Guest attends CPA _____ Guest attends school other than CPA _____ Guest does not attend School _____

Guest is a former CPA Graduate _____

By signing below, you indicate that you agree to abide by the regulations listed above:

Student Signature: _____

I give my son/daughter and their guest permission to attend the CPA Prom. I understand and agree to all of the terms stated in this contract.

Parent Signature: _____

Parent/Guardian Contact Phone (in case of emergency)#: _____

I give permission for my son/daughter to depart before the end of prom (sign below if yes):

Any Special Dietary Concerns

Vegetarian _____ Food Allergy _____ Other _____

See other side for guests

FOR GUEST ONLY

Guest Name _____

High School: _____

Vice Principal's Name: _____ Vice Principal's Phone#: _____

Vice Principal's Signature (if student is in good standing) _____

By signing below, you indicate that you agree to abide by the regulations listed above:

Guest Signature: _____

I give my son/daughter permission to attend the CPA Prom as a guest. I understand and agree to all of the terms stated in this contract.

Parent of Guest Signature: _____

Parent/Guardian Contact Phone (in case of emergency)#: _____

I give permission for my son/daughter to depart before the end of prom (sign below if yes):

Any Special Dietary Concerns

Vegetarian _____ Food Allergy _____ Other _____

**This form must be returned to the main office by WEDNESDAY, APRIL 26.
You cannot purchase your prom ticket unless this form has been completed,
signed by all parties and returned.**