

Code of Conduct + Dress Code + Guest Approval - DVCLC Fab 50's Dance 2018

This event is for DVCLC homeschool students (grades 6-12) and their guests (1 per student). Please carefully read **all** the following information before signing. To participate, students and guests must agree to and abide by the rules stated below. Each attendee must have this form on file with DVCLC ASB by February 26th, 2018. You can esign this doc and send to mrs.meg.smith@gmail.com, or turn in to an ASB advisor at Co-op Park Days on Feb. 19th or 26th.

Dress code:

Ladies and Gentleman: Fun 50's Attire required- fancy or casual as long as era appropriate. No bare midriffs/back, low necklines, unbuttoned shirts, sheer fabrics, bodycon or attire that creeps more than 4" from top of the knee. For specific questions about attire, email mrs.meg.smith@gmail.com. Please don't come dressed in everyday clothes. Themed dress makes this event feel special and fun for everyone!

Code of Conduct:

Students will display proper etiquette, behaving appropriately at all times and avoiding unkind remarks, profanity, and coarse jokes while in attendance. Students are to respect and extend courtesy to fellow students, parents, and chaperones. We are very fortunate to have use of the Garden Fellowship Church and all attendees are expected to treat the property and facilities with respect.

This event includes a wide range of ages and takes place in a church setting, therefore we ask that students view this dance as fun + wholesome. This is not a "couple-specific" event so we require students to refrain from physical demonstrations of affection including body-to-body contact, hand holding, etc.. while attending. No suggestive dancing will be tolerated and DJ will ignore questionable song requests.

Students may not bring guests over the age of 18 and **all guests must be approved by ASB Advisors prior to the event.** Students may not leave the premises until 9:30 p.m. without an accompanying parent (or without prior parental notice if student will be driving themselves.) If an attendee needs to leave early, they may do so **ONLY** if the ASB advisors and parents have spoken. If students "disappear" during the dance, parents will be contacted. Those in attendance are to remain in designated event areas for safety reasons. Adult chaperones will be monitoring the entrance, hallways, and dancing areas during the event.

Violation of the above rules will result in organizers/chaperones contacting parents and possibly student(s) being asked to leave. Please keep this evening fun for everyone by abiding by the rules!

I have read the Dress Code & Code of Conduct and I agree to comply with the rules as stated.

Student's Name + email (print) _____

Student's Signature _____ Date: _____

Student you are accompanying (if guest) _____

Parent's Name + Phone Number (print) _____

Parent's Signature _____ Date: _____

Non DVCLC Student Activity Approval Form

Student Name (print): _____

Current school: _____

Address: _____

Phone: _____

Student (signature): _____

Student Accompanying: _____

**I give my son/daughter permission to attend the DVCLC Fab 50's Dance on Friday,
March 2, 2018 from 6:00 p.m. to 9:30 p.m. at the Garden Fellowship Church.**

Print: Parent/Guardian _____

Sign: Parent/Guardian _____

Date: _____

Emergency Phone Number _____

For Office Use Only:

Administrator's Approval: _____

Date of Approval: _____

Medical/Liability Release Form

Name: _____ Age _____ DOB _____

Address: _____ City _____ Zip _____

Parent's Name(s): _____

Parent's Phone: _____

Email: _____

In Case of an Emergency – notify: _____ Phone: _____

Family Doctor: _____ City: _____ Phone: _____

Insurance Co. _____ Policy No. _____

Insurance Company Address: _____

The Event: DVCLC Fab 50's Dance : March 2, 2018

The Garden Fellowship, 79733 Country Club Dr, Bermuda Dunes, CA 92203

I understand that this event is organized and facilitated by volunteers. I understand that the organizers are not to be held liable for any accident/illness involving my child. I understand that the organizers are not to be held liable under any circumstances and it is my responsibility to adhere to all of the agreements included in the code of conduct and dress code.

In the event I cannot be reached, I authorize the organizers and/or their representatives to hospitalize, secure medical treatment, and/or order any injection, anesthesia, or surgery as they deem necessary.

MEDICAL ALERT

Is he/she presently taking medication: Yes No Medications: _____

Allergies: _____ Medical Conditions: _____

(Your signature grants permission for your student to participate in the event, removes liability and allows for medical treatment in case of an emergency.)

Parent Name (print): _____ Home Phone: _____

Parent's Cell: _____ Email address: _____

Signature of parent or legal guardian _____ Date _____