



CAHS Prom Permission Form



∞ Diamond Dreams ∞

The **2011 CAHS Grand March/Prom "Diamond Dreams"** will be held Saturday, May 14, 2011. The Grand March will begin at 2:00 p.m. in the CAHS Auditorium. By 4:00 p.m., all Prom attendees must be on the coach buses to leave for *Stratigos Banquet Center* in North Huntingdon, PA. ALL Prom attendees must remain at *Stratigos Banquet Center* and return to the CAHS via the coach buses. This dance is a formal occasion! Students and their dates, regardless of age, are expected to follow the rules and regulations set forth by the Connellsville Area School District. All attendees must agree to the following rules:

1. **NO** use of tobacco products (including smoking, snuff, etc.) on school property, coach buses or at *Stratigos*.
2. **NO** alcohol permitted on school property, coach buses, or at *Stratigos Banquet Center*.
3. **NO** inappropriate behavior including public display of affection or offensive language.
4. Formal Attire **must** be kept on the entire night. **Only** jackets may be removed.

CAHS/CACTC Student's Name _____ Grade _____

Guest's Name _____ CAHS/CACTC Student: YES NO

If guest is not a student at CAHS or CACTC, please complete the following information:

Age of guest: _____ Guest's school or college: _____

If not in school or college, place of employment: _____

I, _____ will be attending the **Connellsville Area Senior High GRAND MARCH/PROM** on Saturday, May 14, 2011 from 2 p.m. to 10:30 p.m. I understand this is a school activity and all school district rules apply including no alcohol, no tobacco products, and no inappropriate behavior or language. I also understand if I do not follow the CASD rules, I will be escorted from the dance and appropriate disciplinary action will be taken.

CAHS/CACTC Student's Signature: _____

Guest's Signature: _____

IF CAHS/CACTC guest is 21 years of age or older, a parent's signature is required.

I am aware that my CAHS/CACTC student is attending the dance with a guest 21 years of age or older.

Parent's Signature of CAHS/CACTC: _____ Date _____