

Last Name ONLY: _____

CLASS OF 2019 GRADUATION
Graduation Participation Form



Please **mark** the appropriate box and **sign** accordingly.

I DO WISH TO PARTICIPATE IN THE CLASS OF 2019 GRADUATION CEREMONY

"I have read the graduation information, understand the requirements for participation in the graduation ceremony, acknowledge the due date of **March 22** for payment to Josten's for cap and gown, et al, and recognize the importance of being present for graduation practice in its entirety."

"I agree to comply with all rules, both written and verbal, for the graduation practice and ceremony. These include but are not limited to attendance and participation at graduation practice (**FAILURE TO ATTEND PRACTICE IN ITS ENTIRETY WILL FORFEIT THE OPPORTUNITY TO PARTICIPATE IN THE GRADUATION CEREMONY**), being in line at least 45 minutes prior to the graduation ceremony, and dressing appropriately for the graduation ceremony (including no alteration to my cap and gown). I understand that failure to comply with any of these rules could void my participation in graduation, even as the graduates are entering the ceremony."

By signing below you and your parents understand and agree to all rules regarding the graduation practice and ceremony and that failure to comply with these rules may result my participation in graduation being denied.

(Print) Student Full Name _____
First Middle Last

Signature _____ Date _____

(Print) Parent's Name _____

Signature _____ Date _____

I am a Junior graduating early.

I am graduating in December, but I want to walk in May's graduation ceremony.

Here is my contact information: (phone) _____ (email) _____

I DO NOT WISH TO PARTICIPATE IN THE CLASS OF 2019 GRADUATION CEREMONY

(Print) Student Full Name _____
First Middle Last

Signature _____ Date _____

(Print) Parent's Name _____

Signature _____ Date _____