Class of 2026 - Junior Prom Reservation Form May 2, 2025 - 6:00pm - 10:00pm The Fuge (Warminster, PA)

HC Junior's Name	ID#
Your HC Guest's Name	ID#
Or	
Your Non-HC Guest's Name	
Purchaser's home phone #	cell phone #
Payment - No cash will be accepted. Please make checks payable to HCRHS. Please write in your check number and the amount included.	
Check Number Check Amount (\$90.00 for 1 person/\$180.00 for 2 people) Dietary Requests - Please check the boxes that apply.	
☐ I require a gluten-free meal.	☐ My guest requires a gluten-free meal.
☐ I require a vegetarian meal.	☐ My guest requires a vegetarian meal.
□ I require a dairy-free meal.	☐ My guest requires a dairy-free meal.

Describe any food allergies you or your guest has that we may need to be aware of:

HC Student Guest Prom Forms

Important Information and Rules for the Prom:

- 1. In order to attend prom, students <u>must</u> be in attendance during school on the day of prom from 7:35 am to 12:35 pm. There will <u>NOT</u> be any prom-related early dismissals prior to 12:35 pm. Plan appointments accordingly.
- 2. All participants must arrive no later than 30 minutes after prom start time. No one will be admitted after the 30 minutes unless prior approval has been granted. No one may leave the prom before 9:00 pm.
- 3. Everyone <u>must have a photo I.D.</u> on them in order to be admitted.
- 4. Once in attendance, participants may not go to their vehicles unless accompanied by a chaperone.
- 5. There will be no "re-entry," with the exception of #4. Once participants leave the facility, they may not return.
- 6. HC prom guests must be at least a freshman in high school and under 21 years old the day of prom.
- 7. All HCRHS school rules apply to all students/guests as found in the student handbook on www.hcrhs.org.
- 8. All provisions of the substance abuse policy are in effect including tobacco & vaping possession/use etc. for all participants.
- 9. Random breathalyzer testing will be administered to all students and guests attending.
- 10. Due to the financial commitment by the school on your behalf, there will be no refunds.
- 11. Participants are responsible for providing their own transportation to and from the event.

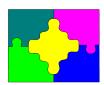
I have read, understood, and agreed to the above rules.

Parent/Guardian Signature: _____

Student Name:
Student Signature:
Parent/Guardian Name:
Parent/Guardian Signature:
Contact Number:

Hunterdon Central Prom Early Release Permission Form
Any students choosing to sign out of school at 12:36 pm for prom-related purposes will accumulate an unexcused absence for block 4. You must be in attendance at school on the day of the prom.
I give permission for my child to be dismissed from school on the day of prom at 12:36 pm. I understand that my child must be in attendance during blocks 1, 2, and 3 and this will be an unexcused absence for the Block 4 class.
Parent/Guardian Name:

Form # Drugtst Rev. 7/14



HUNTERDON CENTRAL REGIONAL HIGH SCHOOL

STUDENT RANDOM DRUG AND ALCOHOL CONSENT TO TEST FORM

I understand fully that my performance as a participant and the reputation of my school are dependent, in part, on my conduct as an individual. I hereby agree to accept and abide by the standards, rules and regulations set forth by the HCRHS Board of Education and the sponsors for the activity in which I participate.

I authorize the HCRHS District to conduct a Drug and Alcohol test on-site if my name is drawn from the random pool. Pursuant to the Student Random Drug and Alcohol Policy, I authorize the following:

- 1. Hunterdon Central Regional High School to release specimens to the testing Laboratory(ies).
- 2. Test laboratory(ies) to release test results to designated Medical Review Officer, MD.

I understand that I may also be randomly drug tested throughout the remainder of the year.

- 3. Medical Review Officer, MD to release test results to Hunterdon Central Regional High School Student Assistance Counselor, Grade Level Administrator and/or Medical Inspector.*
- 4. Hunterdon Central Regional High School to release individual student name, parents name and home phone number to Medical Review Officer, MD regarding all positive drug test results.

Student Name (Please Print)

Student ID Number

Date

Parent/Guardian Signature Parent/Guardian Name (Please Print)

Date

Parent/Guardian Home Phone Parent/Guardian Work Phone Parent/Guardian Cell Phone

I plan to participate in the following sport:

I plan to participate in the following student activity: 2025 Junior Prom

I am volunteering to be placed in the drug testing pool.

I hold a valid HCRHS parking permit.

Parking Decal Number

^{*} All results are kept strictly confidential and are released only to those individuals named above.

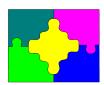
Non-HC Student Guest Prom Forms

Important Information and Rules for the Prom:

- 1. All participants must arrive no later than 30 minutes after prom start time. No one will be admitted after the 30 minutes unless prior approval has been granted. No one may leave prom before 9:00 pm.
- 2. Everyone <u>must have a photo I.D.</u> on them in order to be admitted.
- 3. Once in attendance, participants may not go to their vehicles unless accompanied by a chaperone.
- 4. There will be no "re-entry," with the exception of #3. Once participants leave the facility, they may not return.
- 5. HC prom guests must be at least a freshman in high school and under 21 years old the day of prom.
- 6. All HCRHS school rules apply to all students/guests as found in the student handbook on www.hcrhs.org.
- 7. All provisions of the substance abuse policy are in effect including tobacco & vaping possession/use etc. for all participants.
- 8. Random breathalyzer testing will be administered to all students and guests attending.
- 9. Due to the financial commitment by the school on your behalf, there will be no refunds.
- 10. Participants are responsible for providing their own transportation to and from the event.

I am a guest of ____ (HC Student Name) I have read, understand, and agree to the above rules. Guest Name: Guest Signature: Parent/Guardian Name: ______ Parent/Guardian Signature: _____ Contact Number: Guest School Approval - (If you are no longer in high school, and over 18, you don't need to fill out the bottom portion.) Is the above student currently in good standing at your school? Yes No Do you know of any reason why this person should be excluded as a guest at our prom? If yes, please explain: **Guest's School Administrator Signature** School **Date**

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I understand that I may also be randomly drug tested throughout the remainder of the year.

- 3. Medical Review Officer, MD to release test results to Hunterdon Central Regional High School Student Assistance Counselor, Grade Level Administrator and/or Medical Inspector.*
- 4. Hunterdon Central Regional High School to release individual student name, parents name, and home phone number to Medical Review Officer, MD regarding all positive drug test results.

Student Name (Please Print) Student ID Number Student Signature Date Parent/Guardian Name (Please Print) Parent/Guardian Signature Date Parent/Guardian Home Phone Parent/Guardian Work Phone Parent/Guardian Cell Phone I plan to participate in the following *sport*: I plan to participate in the following *student activity*: 2025 Junior Prom I am *volunteering* to be placed in the drug testing pool. I hold a valid HCRHS parking permit. Parking Decal Number