



STUDENT COUNCIL

GARNET VALLEY HIGH SCHOOL

Participant Registration

Name: _____ **Grade:** _____

In order to participate in Garnet Valley High School's 2019 Mini-THON® there is a registration fee of \$115 which is comprised of \$100, which needs to be raised by **April 26th, 2019**, and also a \$15 registration fee, due by **April 23th**. The \$100 is not expected to come from parents or students directly. The \$100 minimum should be raised through contacting family, friends, neighbors, etc. The funds will go directly to Four Diamonds in order to benefit Pediatric Cancer research and support. The registration fee of \$15 is separate from the \$100 and is used for the participant's T-shirt, Mini-THON gear, and food for throughout the night. The registration fee can be brought in the form of cash, or check made out to Garnet Valley Mini-THON. Donations benefiting Four Diamonds must be done online on Donor Drive or checks made out to Four Diamonds. Please return this waiver and \$15 in an envelope with your name on it to Mrs. Griego-Boruch's room, B120. If you are to leave early or come late to/from the event a note is needed from a parent/guardian, with the time you are leaving or coming late, a parent's signature, and phone number.

Signed Waiver

I. I _____ agree to the following rules in order to participate during Mini-THON® on April 26th, 2019.

- A. The participant agrees to fundraise at least \$100 to benefit Four Diamonds and Pediatric Cancer.
- B. All participants may not leave Garnet Valley High School at any time of the event during 7pm-7am. (Unless a note is handed in by April 26th.)
- C. All of Garnet Valley High School's school rules still apply during Mini-THON®, including dress code and conduct.

Student Signature: _____ **Date:** _____

Parent/Guardian Permission

I, _____, grant permission for my son/daughter, _____, to participate in the 12 hour long Mini-THON® at Garnet Valley High School on April 26th at 7pm until 7am on April 27st. I understand any participant who needs to receive medication during the event must have a parent come drop off the medication other than previously approved inhalers, insulin, or epipens, before the event in a labeled bag.

Parent Signature: _____

Date: _____ **Phone Number:** _____

