

All-Night Senior Grad Party June 3, 2022

Welcome to SENIOR YEAR! This year is going to be packed with excitement and anticipation in looking ahead towards graduation.

There are lots of activities to think about between now and graduation...from finals to applying to colleges, from Homecoming to Prom, from Sports to Cap and Gown...and at the end of it all, the All-Night Senior Grad Party.

The All-Night Senior Grad Party is an event that the senior class parents organize. It is not a schoolsponsored event. This event provides seniors with an opportunity for a safe, drug and alcohol-free celebration with non-stop entertainment all night long.

The All-Night Senior Grad Party gives seniors one last chance to be together as a class. This event will only happen once in a lifetime, but the memories will remain for years and years to come. The All-Night Senior Grad Party Planning Committee has already been hard at work creating the ultimate party that will send our seniors off with a bang!

The All-Night Senior Grad Party begins with organized bus transportation picking up students directly from graduation, traveling to surprise destinations with incredible entertainment, food and music, and then returning seniors to the school in the early morning the following day.

Tickets to the All-Night Senior Grad Party are:

- \$250 if purchased before November 25, 2021
- \$275 if purchased before January 7, 2022
- \$300 if purchased before March 4, 2022
- Financial aid is also available (please email jennifer.L.thomsen@outlook.com for details)

Registration Checklist:

Complete registration form

Send registration form via email to: tiffanycrosby@comcast.net

Make payment

For questions, or to volunteer with the All-Night Senior Grad Party Planning Committee, please email: Tiffany Crosby at tiffanycrosby@comcast.net or Jennifer Thomsen at jennifer.L.thomsen@outlook.com

Go Seniors!

Participant Registration Form

Both sides of this form must be completed in full including all required signatures

Student Full Name:	Birth date:
Student's Address:	City, State, Zip:
Home Phone:	Student's Email:
Parent(s) Name(s):	
Parent(s) Email(s):	
Parent (s) Cell #1:	Parent (s) Cell #2:
Would you like to volunteer to chape	erone? Yes No
Volunteer/Chaperone Name:	
Student's Medical Emergency Contact Info	formation:
Medications currently prescribed:	
Chronic Illnesses/Allergies:	
Emergency Contact (other than parent/guar	rdian above):
Parent/ Guardian will be notified first in an	emergency situation, unless otherwise specified.
Emergency Contact Phone:	Relationship to Graduate:
Physician/ Clinic Name:	
Phone:Address of	or Hospital:
Insurance:	Group/ID:
to attend but cannot afford the ticket price.	o donate to our scholarship pool for seniors who would like
Purchasing # Tickets @ \$	per ticket* = \$
	per ticket* = \$
Donating # Tickets @ \$	per ticket* = \$ Check# Total \$
Donating # Tickets @ \$ Pay with credit card Cash	

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