

ST. JOHN'S HOME EDUCATORS HIGH SCHOOL DANCE LESSON AND DANCES PERMISSION FORM

Participant Name	Date of Birth	Age

DRESS CODE

This permission slip is considered valid for ALL of the following Dates
(Check all that apply)

Dance Lesson Dates (7:00- 9:30pm) Mercy Hall	Fall Barn Dance and Formal (7:00pm-10:00pm) Mercy Hall
9-21-19 _____	10-19-19 (Barn Dance) _____
11-9-19 _____	1-11-20 _____
12-14-19 _____	2-22-20 (Snow Date) _____

Fall Barn Dance Dress Code

Girls/Boys: Jeans allowed but no rips/tears.
Cowboy boots and Cowboy Hats allowed

Girls: Dress or skirt must be mid-knee with shorts underneath. Tops must cover torso, back, chest and shoulders.

Boys: Collared or Button up shirts.
 Slacks or jeans

No T-shirts, no tennis shoes or flip flops

DANCE LESSONS

Shoulders, chest, torso, and undergarments completely covered. Modest length skirts and shorts, no shorter than 3" above the knees. Tights or shorts are required for anyone wearing a flouncy dress or skirt. No flip flops.

**FORMAL DANCE
AND
SEMI FORMAL DANCES**

Boys must wear a suit or suit coat/blazer and tie with dress pants and belt, dress shirt, dress socks, and dress shoes. For girls, dresses or skirts are required attire and must be knee length (top of the knee cap) or longer, to include slits. No spaghetti straps. In general, attendees should err on the side of modesty and formality so as to not place chaperones in the difficult position of upholding our dress code standards. We expect nothing less than full cooperation from attendees and parents/guardians on this issue.

The chaperones reserve the right to determine whether an attendee's attire does/does not fully comply with the SJHE dress code. See complete dress code at www.sjhe-va.org (under Teen Dances/Lessons tab).

Code of Conduct:

- All participants must sign in upon arrival, and sign out if leaving early.
- After entering the dance hall, all participants must remain in the building. Parents of any participant who leaves the building will be called, and the participant will be asked to leave the premises.
- Dance with room for the Holy Spirit between the dancers.
- No running or horseplay.
- Be respectful of all participants, instructors, and adult volunteers.
- **Any photographs taken at the event will NOT Be posted on the internet.** Parent and Teen Initials _____
- **I have read and will adhere to the Code of Conduct, and understand that non-compliance may result in non-admittance or the contacting of my parents and removal from the premises.**

Signature of Attendee: _____

Parental Permission and Liability Release: As parent/legal guardian of the participant named above, I give my permission for him/her to participate fully in the above selected dates for the SJHE High School dance lessons and / or SJHE High School Dances in Mercy Hall. I agree to indemnify and hereby release the Most Reverend Michael Burbidge, Bishop of the Catholic Diocese of Arlington, and his successors in office, as well as the Catholic Diocese of Arlington and all Diocesan clergy, employees, volunteers, and participating parishes and schools from any and all liability, claims, demands for person injury, sickness and death, as well as property damage and expenses of any nature whatsoever which may be incurred by the undersigned of the participant resulting from said participants' involvement in the above-mentioned events (including transportation to and from the event). Furthermore, I, on behalf of the participant hereby, assume all risk of personal injury, sickness, death, damage, and expenses resulting from said participant's involvement in the above described event.

Informed Consent to Medical Treatment: I request that in my absence the above- named minor be admitted to any hospital or medical facility for diagnosis and treatment. I request and authorize physicians, dentists, and staff, duly licensed as Doctors of medicine or Doctors of Dentistry or other such licensed technicians or nurses, to perform any diagnostic procedures, treatment procedures, operative procedures and x-ray treatment of the above minor. I have no been given a guarantee as to the results of examination or treatment. I authorize the hospital or medical facility to dispose of any specimen or tissue taken from the above-named minor. I assume full responsibility for all costs of such treatment. Further, should it be necessary for the participant to return home due to medical, disciplinary, or other reasons, I do hereby assume responsibility for the participant's transportation home and any costs related thereto.

Photography Consent: I hereby Grant Do Not Grant permission for photo(s) of my teen to be posted to the SJHE website (secure side only) for view by SJHE members only.

Email: _____

Signature of Parent/Guardian: _____

Phone Number: _____

Emergency Contact (If different than Parent/Guardian)

Name: _____

Allergies: _____

Phone: _____