

## Shaftesbury Safe Grad 2026

**Cost \$100/ticket**

<b>Graduate Information</b> (Please Print)		<b>Guest Information</b> (if not a SHS Grad)	
Last Name		Last Name	
First Name		First Name	
Address & Postal Code		Address & Postal Code	
Phone #		Phone #	
Email Address		Email Address	
DOB (YYYY/MM/DD)		DOB (YYYY/MM/DD)	
Age on June 29, 2026		Age on June 29, 2026	
MB Health Reg # (6 digits)		MB Health Reg # (6 digits)	
Personal Health ID # (9 digits)		Personal Health ID # (9 digits)	
Allergies/Medical Conditions (drug, food or environmental)		Allergies/Medical Conditions (drug, food or environmental)	
Emergency Contact Name		Emergency Contact Name	
- Relationship		- Relationship	
Emergency Contact Phone #		Emergency Contact Phone #	

I have read the Safe Grad Rules and Regulations issued for this event and agree to be bound by them. I agree to either of the individuals name in the Transportation Release Form to provide the graduate and/or guest safe transport home. In consideration of purchasing a ticket or my being allowed to take part in this event, I, for myself and my heirs, agree to release, save harmless and keep indemnified the 2026 Safe Grad Committee (which term shall include its organizers, and their respective agents, officials, servants, and representative) from and against all claims, actions, costs, and expenses in demands in respect to death, injury, loss, or damage to my person or property, howsoever caused, rising out of or in connection with my taking part in this event. It is understood and agreed that this agreement is to be binding on myself, my heirs, executors, and assigns.

I/we declare having read and understood the above.

<b>Graduate</b>	Signature:	<b>Guest</b>	Signature:
	Printed Name:		Printed Name:
	Date:		Date:
<b>Parent/Guardian or ISP Required</b>	Signature:	<b>Parent/Guardian or ISP Required</b>	Signature:
	Printed Name:		Printed Name:
	Date:		Date:

**\*\*PRIVATE AND CONFIDENTIAL\*\***

This document will be destroyed within five days of the Safe Grad Event