



Project  
**GRADUATION**  
*Tenaflly High School 2017*

**2017 Event Chairs**

Elena de la Torre-Renaud

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201.931.6910

**THS H.S.A. Project Graduation Invites the THS Class of 2017  
To a Memorable, All-Night Final Class Celebration!**

**Who: All Tenaflly High School Seniors**  
**What: Food, Drink and Fun**  
**Where: Surprise Destination!**  
**Departs: June 21st, at 9:00p.m. from the THS Cafeteria**  
**Returns: June 22nd, by 4:00a.m. to TMS**  
**Cost: Free!**

STUDENT BUS SIGN UP in the Senior Hallway:

April 18th, 10:30a.m. - 1:30p.m.

April 19th, 1:00p.m. - 3:30p.m.

April 20th, 10:30a.m. - 1:30p.m.

***Students MUST submit the attached completed and signed Parent/Guardian and Student Consent form by April 7th, 2017.***

Parents must sign the form, even if the senior is 18 years of age.

Forms may be returned to THS to the principal's office in the box marked "Project Graduation" or mailed to Ilana Volkov, 52 George Street, Tenaflly, NJ 07670 **by April 7, 2017**. Any questions, please contact any of the 2017 Event Co-Chairs listed above.



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Dear Seniors and Parents/Guardians: Please read the guidelines below before completing and signing the enclosed consent form!

- Seniors **MUST** take the bus.
- Casual, comfortable clothing, such as shorts and t-shirts.
- No use of or possession of alcohol, drugs, tobacco products or any other illegal, intoxicating or hallucinogenic substance before or during Project Graduation will be allowed.
- No bags, purses or backpacks of any kind will be allowed.
- Female hygiene products will be provided at the venue.
- Parents of students with special medical needs should contact one of the Event Co-Chairs listed above.
- The Project Graduation Committee will be patting down all students prior to boarding the buses.
- Police will be on site prior to boarding buses.
- No outside food or drink will be allowed – students will be provided with food and beverages at the venue.
- Once you check in with the Project Graduation Committee in the Tenaflly High School Cafeteria you may not leave until the end of the event.
- In an emergency the Tenaflly Police Department will know the event location.
- We expect you to arrive promptly at 9:00p.m. on June 21st. Buses cannot leave until all students have boarded.
- Please arrange for transportation home upon return from the event. Students may park their cars at the Tenaflly Middle School lot and drive home after the event.

***Please notify us if you have a change of plans at [ivolkov@coleschotz.com](mailto:ivolkov@coleschotz.com).***

**Tenaflly High School 19 Columbus Drive Tenaflly, NJ 07670 (201) 816-6600**



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**Parent/Student Consent to Attend Project Graduation Form -- page 1**

This complete consent form must be received by Friday April 7, 2017 in order for students to participate in bus sign-up and selection. Please return completed forms to the THS principal's office in the box marked "Project Graduation" or mailed to Ilana Volkov, 52 George Street, Tenafly, NJ 07670 **by April 7, 2017.**

Any questions, please contact any of the 2017 Event Co-Chairs listed above.

Student Information:

Full Name: \_\_\_\_\_

Nickname: \_\_\_\_\_

Student ID#: \_\_\_\_\_ Homeroom: \_\_\_\_\_

Birthday: \_\_\_\_\_

Student Cell Phone #: \_\_\_\_\_

Student Email Address: \_\_\_\_\_

List any medications, allergies and/or any medical conditions we should be aware of: \_\_\_\_\_

Parent/Guardian Information:

Full name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone number you can be reached at during event: \_\_\_\_\_

Alternative Emergency Contact: (friend or relative)

Name: \_\_\_\_\_

Phone number: \_\_\_\_\_



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**Parent/Student Consent to Attend Project Graduation Form -- page 2**

\_\_\_\_\_ has my permission to participate in Project Graduation 2017 June 21 - 22, 2017. I have reviewed the enclosed information with my child and agree to all of the conditions placed upon him/her. If my child is found under the influence or possession of any drug or alcohol, or his/her behavior is questionable, I will be available at the above number and will be responsible to pick up my child promptly. In the event of an emergency, the chaperones have my permission to obtain medical care for my child.

\_\_\_\_\_  
Parent/Guardian Signature of Agreement

I have reviewed the enclosed information and I agree to all the conditions placed upon the student attending Project Graduation 2017. I understand that this is a drug, alcohol and tobacco free evening and by signing this consent I agree that I will not come to the party under the influence of alcohol or any drug, will not bring anything of this nature to the celebration, and will not be under the influence of any of the above mentioned substances during the event.

\_\_\_\_\_  
Student Signature of Agreement