

# Prom Bid Order Form

Prom 2013

Saturday, March 23, 2013

Titan Royale

Parkway Place

2592 Parkway Plaza, Maumee, OH 419-794-2121

Dinner and Dance 7:00-11:00pm

After Prom 2013

University of Toledo Recreation Center

11:00pm-2:00am

Bid Sales will take place at SJJ Monday, March 4 through Friday, March 8, 2013 during lunch periods

Please complete this form entirely and include it with your payment when buying your bid.

When completing your forms:

- Complete **all** the information. Please complete the reverse side of form if applicable. Your date's information must also be complete.
- The UT Rec Center Release forms for you **AND** your date must also be completed and turned in at the time of purchase. Please note: if you and your date intend to do the high ropes course you will each need to complete the waiver and the health questionnaire. Additional release forms are available for download on the SJJ website.
- The Chaperone Sheet must be turned in even if your parent/guardian will not be helping.
- Acceptable forms of payment are by check for the exact amount, cash or credit card. Checks are to be payable to St. John's Jesuit High School.

### Prom:

- This is a formal event. Gentlemen should be wearing a tuxedo/suit with dress shoes. No caps, hats, tennis shoes, flip flops or other inappropriate accessories permitted. Ladies dresses should be appropriate. Plunging necklines and low backs as well as very short dresses are certainly not permitted
- Please respect the work of the decorators by not playing with the table decorations
- You are **not permitted** to leave the prom. The chaperones **will not** escort you to the car to retrieve something you have forgotten. Therefore, bring everything with you when you enter-phone, camera etc.
- We are concerned for your safety and **we will call your parent/guardian if you do not arrive at the prom by 8:00pm for dinner.**
- Dinner will be served buffet style. Tables will accommodate 10 people. Tables will be assigned for groups who have all purchased bids and have submitted their party of 10 by March 13, 2013. Once table assignments have been completed, no changes in the seating party can be made.

### After Prom:

- Each student as well as his date must complete a separate UT release form. Any student not attending prom may attend after prom with a signed release form. Please note this year, UT has a new challenge course. In order to participate each student must complete and sign a separate challenge course release and health history questionnaire. **ALL UT forms must also be signed by a parent or guardian for students under 18 years of age.**
- Prom will end at 11:00pm. Students and their dates can check in between 11:00pm and 12:00am. Again we are concerned for your safety **if you do not arrive to after prom by 12:00am, we will call your parent/guardian.** Participants may not leave until the event is over at 2:00am.
- Tennis shoes are required. Comfortable, appropriate athletic wear recommended. This year we will **not** be using the pool.
- Please park in parking areas 18 or 9.
- In the event of an emergency, the UT Recreation Center phone number is 419-530-3700.

# Prom Bid Order Form

Student's Last Name:

\_\_\_\_\_

Bid #

\_\_\_\_\_

Check one:

☐

Double Prom & After Prom

\$100.00

☐

Double After Prom ONLY

\$50.00

☐

Single After Prom ONLY

\$25.00

Information must be COMPLETE

Student Name:

\_\_\_\_\_

Address:

\_\_\_\_\_

\_\_\_\_\_

Home Phone:

\_\_\_\_\_

Parent Cell:

\_\_\_\_\_

T-Shirt Size:

Small Medium Large X-Large XX-Large

(Circle one)

Date's Name:

\_\_\_\_\_

Date's School:

\_\_\_\_\_

Address:

\_\_\_\_\_

\_\_\_\_\_

Home Phone:

\_\_\_\_\_

Parent Cell:

\_\_\_\_\_

T-Shirt Size:

Small Medium Large X-Large XX-Large

(Circle one)

## Office Use Only

\_\_\_\_\_ 1 Rec Ctr form

\_\_\_\_\_ 2 Rec Ctr forms

\_\_\_\_\_ 1 High Ropes Form

\_\_\_\_\_ 2 High Ropes Forms

\_\_\_\_\_ Chaperone Sheet

\_\_\_\_\_ Paid Check # \_\_\_\_\_

Credit

Cash

## Chaperone Sheet

Volunteer to Chaperone After Prom 2013

This form must be filled out by one or both parents/guardians.

Please consider volunteering for After Prom. Fill out the form and return with your child when they purchase the bid.

This form **must** be filled out and turned in with the bid order packet.

Thanks to all who volunteer!

Parent(s) Name \_\_\_\_\_

Phone Number to confirm \_\_\_\_\_

Parent e-mail \_\_\_\_\_

Student's Name \_\_\_\_\_

☐

I am willing to help-sign up using the following link.



**FREE online sign ups for groups? That's genius!**

Hello!

You have been invited by Barb Layman to sign up for "After Prom Volunteers."  
Please click on the link below to view the online sign up sheet.

To sign up, go to:

[www.SignUpGenius.com/qo/70A0F49AAAD23A13-after/7806778](http://www.SignUpGenius.com/qo/70A0F49AAAD23A13-after/7806778)

☐

Dessert Donation \_\_\_\_\_

Please drop off Dessert Donations March 22 in front of AP Office or March 23 Lyden Ctr Parking Lot

☐

Gatorade Donation

Please drop off Gatorade Donations March 18-22 in front of AP Office or March 23 Lyden Ctr Parking Lot

☐

No, I will not be able to chaperone.

*Office of Recreation*  
**Liability Release and Covenant Not To Sue**

This is a legally binding Release executed by \_\_\_\_\_ *Full legal name of Participant*  
(Participant) whose address is \_\_\_\_\_

*Necessary only if minor or for an adult who is incompetent to sign on his/her own behalf* and by  
\_\_\_\_\_ *Full legal name, address of Participant's Parent or Guardian*

(Participant and Participant's Parent or Guardian collectively referred to as "We") to The University of Toledo.

We, the undersigned, request that the Participant be granted permission to utilize the Student Recreation Center on the Main Campus of The University of Toledo for the following activities, including, but not limited to: using any Student Recreation Center facilities or equipment for any purpose, any sport, any exercising, taking any classes, use of the track, use of the locker rooms, use of any and all facilities and equipment in the natatorium, playing any games, etc. and any and all other activities during the membership period to the Student Recreation Center ("Activity"). We understand the risks inherent in said activity, which may include bodily injury, death or property damage.

In consideration of Participant being permitted to participate in the Activity, we do hereby release, waive, forever discharge, and covenant not to sue the State of Ohio, The University of Toledo, its governing board, officers, agents, employees, and any students acting as employees ("Releasees"), from and against any and all liability for any harm, injury, damage, claims, demands, actions, causes of action, costs, and expenses of any nature which Participant may have or which may hereafter accrue to Participant, arising out of or related to any loss, damage, or injury, including but not limited to suffering and death, that may be sustained by Participant or by any property belonging to Participant, whether caused by the negligence or carelessness of the Releasees, or otherwise, while Participant is in, on, upon, or in transit to or from the premises where the Activity, or any adjunct to the Activity, occurs or is being conducted. It is our express intent that this release and hold harmless agreement shall bind the members of Participant's family, estate, heirs, administrators, personal representatives or assigns.

We understand and agree that Releasees may not have medical personnel available at the location of the Activity. We understand and agree that Releasees are granted permission to authorize emergency medical treatment, if necessary, and that such action by Releasees shall be subject to the terms of this Agreement. We understand and agree that Releasees assume no responsibility for any injury or damage, which might arise out of or in connection with such authorized emergency medical treatment.

In signing this Release, we acknowledge that we have reviewed and understand what the above means and that this document is signed as a free act and deed. No oral representations, statements, or inducements, apart from the foregoing written statement have been made. We further state that there are no health-related reasons or problems which preclude or restrict the Participant's participation in this Activity, and that Participant has adequate health insurance necessary to provide for and pay any medical costs that may be attendant as a result of injury to Participant. We further agree that this Release shall be construed in accordance with the laws of the State of Ohio.

As a signatory below, I state that I am fully competent to sign this Release; and that I execute this Release for full, adequate, and complete consideration fully intending for myself, for Participant and Participant's family, estate, heirs, administrators, personal representatives, or assigns to be bound by the same.

**THIS IS A RELEASE OF LEGAL RIGHTS. READ BEFORE SIGNING.**

Please check the appropriate box:

☐ Recreation Outing      Date: \_\_\_\_\_  
Rental Group/Org.: \_\_\_\_\_

☐ Child Release Form

\_\_\_\_\_  
Date

\_\_\_\_\_  
Participant Name (please print and sign your name)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent or Guardian, if participant is under 18 years of age (please print and sign your name)

\_\_\_\_\_  
Phone # Parent/Guardian

\_\_\_\_\_  
Participant Birth Date



## Challenge Course Health History Questionnaire

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Age: \_\_\_\_\_

To remind participants of the seriousness of attempting adventure activities with a pre-existing medical condition; please read the following questions carefully and answer each one honestly. This form will remain confidential and the Office of Recreation, Challenge staff reserve the right to refuse participation

YES NO Do you have any pre-existing medical conditions?  
If yes, please explain: \_\_\_\_\_

YES NO Are you currently taking any medication or prescription drugs?  
Please list the medication and its purpose: \_\_\_\_\_  
\_\_\_\_\_

YES NO Have you had a major surgery or illness within the last 6 months?  
Please explain: \_\_\_\_\_

YES NO Do you have any allergies (food, bees, insects, or medicines)?  
If so, please explain: \_\_\_\_\_

YES NO Do you have a disability that may prohibit you from completing the challenge course?  
If so, please explain: \_\_\_\_\_

YES NO Do you have a heart condition?

YES NO Has a physician ever told you or are you aware that you have high blood pressure?

YES NO Are you pregnant?

YES NO Do you have epilepsy?

YES NO Do you carry an inhaler?

YES NO Do you foresee any problems participating in the upcoming Challenge activity do to a lack of physical exercise?

YES NO Do you feel any pressure or coercion from an employer or others to participate?

Describe your current level of physical activity: \_\_\_\_\_

In case of emergency, contact: \_\_\_\_\_ Phone: \_\_\_\_\_

### Participant-please read and sign

I have honestly disclosed to the staff any medical, psychological, or personal information relating to my health. I will remember that a Challenge by Choice® atmosphere exists at all times, and I should not feel pressured to participate.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\*PLEASE LOOK ON OTHER SIDE.

## PARTICIPANT ASSUMPTION OF RISK, RELEASE, AND AGREEMENT

In consideration of the services of the University of Toledo; their agents, owners, officers, volunteers, participants, employees, and all other persons or entities acting in any capacity on their behalf (hereinafter collectively referred to as UT), I hereby agree to release, indemnify, and discharge UT, on behalf of myself, my children, my parents, my heirs, assigns, personal representative and estate as follows:

1. I acknowledge that my participation in ropes course activities entails know and unanticipated risks, which could result in physical or emotional injury, paralysis, death or damage to myself, to property, or to third parties. I understand that such risks simply cannot be eliminated without jeopardizing qualities of the activity.

UT programs are based on the "challenge by choice" principle. At any time you and/or your group are free to withdraw from participation in ropes course activities. The risks include, among other things, the potential for: slips, falls and falling; rope burns; pinches, scrapes, twists and jolts that could result in scratches, bruises, sprains, lacerations, fractures, concussions, or even more severe life threatening hazards. During an activity there may be contact with plants, animals, or insects that could create hazards such as stings, allergies, and associated diseases. Furthermore, UT instructors have a difficult job to perform. They seek safety, but are not infallible. They might be unaware of a participant's fitness or abilities.

2. I expressly agree and promise to accept and assume all of the risks existing in this activity. My participation in this activity is purely voluntary, and I elect to participate in spite of the risks.

3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless UT from any and all claims, demands, or causes of action, which are in any way connected with my participation in this activity or my use of UT equipment of facilities, including any such Claims which allege negligent acts or omissions of UT.

4. Should UT or anyone acting on their behalf be required to incur attorney's fees and cost to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.

5. I certify that I have adequate insurance to cover any injury or damage I may cause or suffer while participating, or else I agree to bear the costs of such injury or damage myself. I further certify that I am willing to assume the risks of any medical of physical condition I may have.

6. In the event that I file a lawsuit against UT, I agree to do so solely in the state of Ohio, and I further agree that the substantive law of that state shall apply in that action without regard to the conflict of law rules of that state. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect

By signing this document, I acknowledge that if anyone is hurt or property is damaged during my participation in this activity, I may be found by a court of law to have waived my right to maintain a lawsuit against UT on the basis of any claim from which I have released them herein.

I have had sufficient opportunity to read this document. I have read and understood it, and I agree to be bound by its terms.

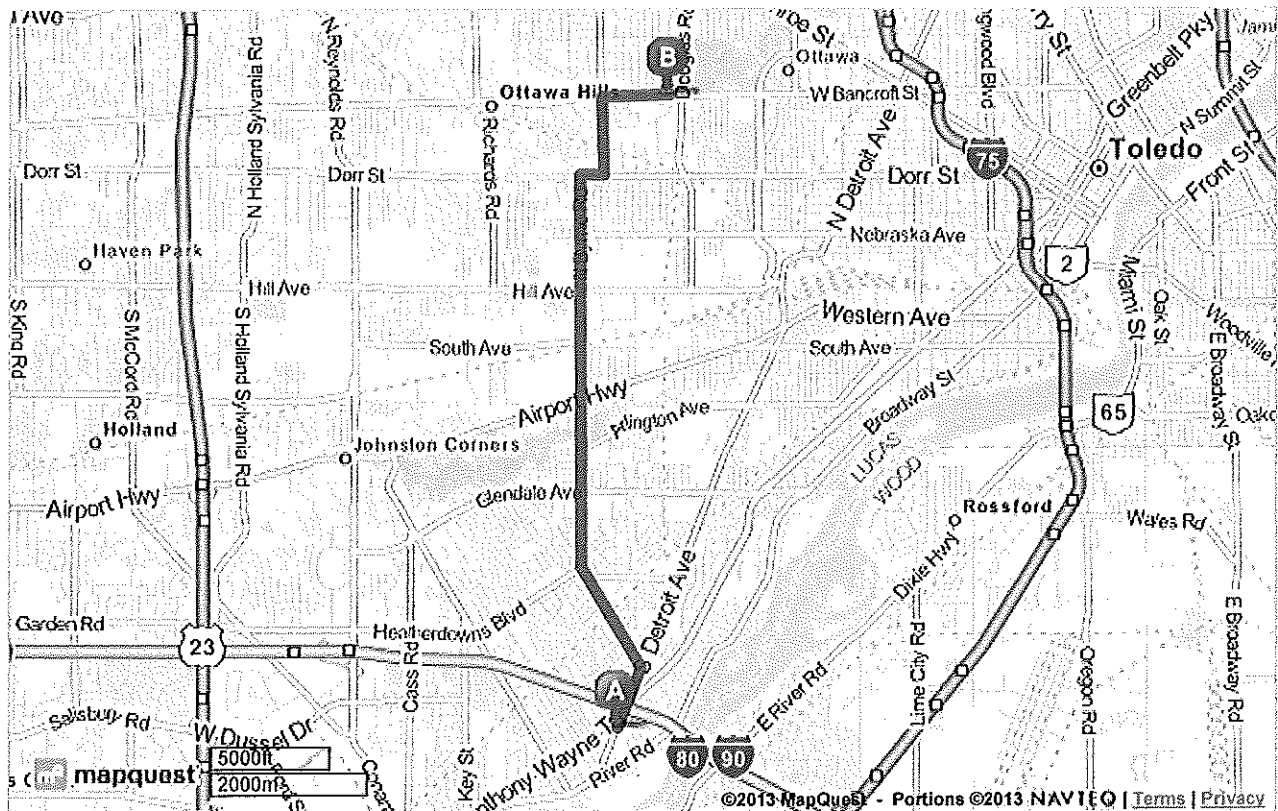
Signature of Participant \_\_\_\_\_ Print Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_ Date \_\_\_\_\_

Parents or Guardians Additional indemnification (Must be completed for participants under the age of 18)

In consideration of \_\_\_\_\_ (print minor's name) ("Minor") being permitted by UT to participate and to use its equipment and facilities, I further agree to indemnify and hold harmless UT from any and all Claims which are brought on behalf of Minor, and which are in any way connected with such use or participation by Minor.

Parent or Guardian \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_

Total Travel Estimate: 6.63 miles - about 13 minutes



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**A 2592 Parkway Plaza, Maumee, OH 43537**

1. Start out going north on Detroit Ave toward Country Blvd. [Map](#) 0.6 Mi
2. Turn left onto S Byrne Rd. [Map](#) 4.5 Mi
3. Turn right onto Dorr St / OH-246. [Map](#) 0.2 Mi
4. Take the 1st left onto Secor Rd. [Map](#) 0.7 Mi
5. Turn right onto W Bancroft St. [Map](#) 0.6 Mi
6. 2801 W BANCROFT ST is on the right. [Map](#)

**B University of Toledo**  
2801 W Bancroft St, Toledo, OH 43606  
(800) 586-5336





Involved, active chaperones are essential to the success of your rental event. All visiting groups with youth under 18 years of age are required to have active chaperones present in all activity areas.

The role of the chaperone is to oversee the event participants and activities, and to assist and support the Office of Recreation staff with policy enforcement and discipline of the event participants.

Failure to fulfill the role you have accepted could result in the injury or even death of a participant(s) and/or Office of Recreation staff member(s).

**POLICIES** – All Policies can be found in the Office of Recreation Magazine available in the Main Office and at [www.UTRecCenter.com](http://www.UTRecCenter.com)

**If you need clarification on any policies, call the Office of Recreation 419.530.3700 in advance or check with the facility staff during your rental.**

## **BASICS**

- ♦ Active adult chaperones are required in each activity area being used-including locker rooms; we recommend more than one per area if the group is large (30+) or under high school age.
- ♦ We have age limits in our higher risk areas – visitors are wrist banded or hand stamped to reflect their age group. **DO NOT REMOVE THE ASSIGNED BAND OR ATTEMPT TO SWITCH THE WRIST BAND** – doing so places the participant and our staff at increased risk of injury. Participants who fail to comply with instructions or policies will have the wristband removed and will be evicted from the facility to wait in the entry hallway.
- ♦ The RC is an alcohol and tobacco free facility. If participants have been drinking before coming in an event, they are denied entry and minor's parents are called to come and get them. This is a primary chaperone duty but RC staff may remove problem people and bring them to your attention. Intoxicated individuals put themselves and others at greater risk of injury.
- ♦ Appropriate exercise attire must be worn: clean swim attire, full T-shirt, shorts, warm-ups, or sweat suit. Street clothing are not permitted as it can be dangerous and confining when exercising. Head coverings (including baseball caps) are prohibited on the courts and in the climb cave; for safety reasons.
- ♦ Appropriate athletic foot wear must be worn whenever using the facility. Any athletic shoe that marks or mars the court or floor is not permitted. Only bare feet, clean swim shoes or flip flops are allowed on the pool deck. All street shoes are prohibited.
- ♦ Photography is allowed only with a photo pass from the RC main office. Be respectful of people's privacy and safety. Limit all photography to meeting room and activity areas only.
- ♦ All clothing and bags must be stored in LOCKED lockers – participants should bring a sturdy hasp or key lock or quarters to use coin operated lockers. No glass containers in locker room or pool areas. Groups using a room for food may choose to leave bags in the room but do not leave valuables unattended. The University and its staff are not responsible for lost, stolen or damaged property.
- ♦ Food and beverage consumption is restricted to the room assigned for your event. Keep food in this area; do not allow participants to bring food out into activity areas. No gum and candy please. Please exit your room as scheduled and clean your room before leaving.
- ♦ If an injury occurs, please contact a member or the recreation staff immediately. The University and its staff are not responsible for injuries. All participants are financially responsible for all expenses related to injuries and emergency care, including medical care, ambulance, and other expenses. Bring emergency contact list and keep it in your possession.

## Restrictions Youth under age 14 and Pre-High School Groups

- ♦ Children, age 6-13 years are required to pass our swim test and wear a RC pool bracelet to qualify for use of the water slide, deep water and diving pool. Children under age 6 are prohibited use of these areas.
- ♦ Prohibited use of the spa and sauna in the pool area
- ♦ Prohibited access to and use of exercise machines and free weight room
- ♦ Prohibited access to and use of the track unless approved and under direct supervision of teacher or parent
- ♦ Prohibited access to and use of Climb Cave, Walleyball and Racquetball; Walleyball and Bouldering in the climb cave may be approved with direct supervision of a teacher or parent in the court and adult spotting for Bouldering.

## Pool Chaperones

- ♦ A chaperone from the rental group must be present on deck when children are in the pool area. If there is no chaperone present, children will be asked to exit the pool area immediately.
- ♦ Be attentive to children under your supervision at all times. Roam the pool deck to make sure children are listening to the lifeguards
- ♦ Use the Crew Chief and Supervisor as a resource to answer questions and concerns. Lifeguards must watch the pool and are available for short, quick inquiries only.
- ♦ Stay close to small children and non-swimmers. Children under 6 years of age are required to be directly supervised by an adult in the water with them. Any child wearing a flotation vest must also have an adult in the water with them, within arms' reach.
- ♦ Flotation devices and toys from outside our facility are prohibited without advance written approval of the Director.
- ♦ If someone in your group is hurt or injured while swimming be available to the pool staff to answer questions about the child (name, emergency number, etc.) Have this information on hand for each member of the group.
- ♦ Be available to deal with behavior problems of children in your group. Children receive an orientation and are warned and corrected before being removed from an activity or the facility. Assist RC Staff with enforcement of time-outs and removals to correct misbehavior.

Group: \_\_\_\_\_ Visit Date: \_\_\_\_\_

Print Chaperone Name: \_\_\_\_\_

I attest by my signature I have read the above policies and informed my chaperones and participants of the policies and the necessity to follow the policies and directions of SRC staff. Failure of my group to comply may result in immediate cancellations of the event (without refund), additional surcharges for future visits or rejection of future applications at the discretion of the SRC Management.

Chaperone Signature: \_\_\_\_\_

Print SRC Staff Witness: \_\_\_\_\_

SRC Staff Signature: \_\_\_\_\_