



## Stop the Violence Rally 2010

### IMPORTANT NOTICE!!!

Please complete this form and bring with you the day of the rally. This form **MUST** be submitted to the registration booth prior to entering the event and all children listed **MUST** be with you at the time of submission. This form is intended to gather community information and to increase the efficiency of the registration process. There is **NO GUARANTEE OR PRE-REGISTRATION** for **ANY** backpacks, prizes, food or giveaways to be given out during the rally. All registration is on a first come first serve basis.

**FOR CHAPERONES:** Please fill in the information for each child in your care who is **PRESENT** at the rally with you.

Child's Name	Age	School	Grade	Did your child attend this event last year?	Did your child have in-school or out of school suspension during the 2009-2010 School Year?
1.					
Address: _____ City, State, Zip: _____					
Phone Number: (____) _____					
2.					
Address: _____ City, State, Zip: _____					
Phone Number: (____) _____					
3.					
Address: _____ City, State, Zip: _____					
Phone Number: (____) _____					
4.					
Address: _____ City, State, Zip: _____					
Phone Number: (____) _____					

I, \_\_\_\_\_, give the School Board of Alachua County permission to release the child(ren) in my care's disciplinary record for the 2010-2011 school year to Meridian Behavioral Healthcare, Inc.

**Parent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_