

École Royal Bay Secondary School 2025 WINTER FORMAL

Dear Grade 12 Students, Parents/Guardians:

Winter Formal begins the celebration of our students' Grade 12 year. At this annual event, there will be a delicious buffet dinner, a fantastic photo booth and a local DJ! Space is limited so get your tickets quickly.

The event is hosted at Olympic View Golf Club. This is a school event and our students are expected to abide by the Code of Conduct. There will be a bag check at the door. Any students found to be in Breach of Conduct will not be permitted entry, and/or escorted from the event. Refunds will not be provided for students who are asked to leave, or who choose to leave early.

To be Submitted to Office - Consent Form AND Confirmation of Payment:

(Submissions will be accepted starting Monday, November 3rd, 2025 / Due no later than Monday, November 24th, 2025)

Signed Consent Form (handed out to students on October 27th, 2025) Proof of Payment of \$90

Methods of Payment of \$90 (Opens Monday, November 3rd, 2025):

- School Cash Online receipt along with signed Consent Form
- Cash with signed consent form
- Cheques payable to School District #62 with signed Consent Form

Students will **not** be placed on the event list until **both** the payment and signed Consent Form are received. Students should bring proof of purchase to the event.

Event Details:

Date: Thursday, December 11, 2025 Location: Olympic View Golf Course

Principal/Vice Principal Authorization: ___

	Fime: 5:30 – 9:30 PM	
	 Doors open at 5:00 - 5:30 PM; No one will be per Once an attendee departs, no re-entry permitted. Open to École Royal Bay GRADS only – no gues 	,
#		
WIN'	TER FORMAL 2025: Consent Form	
Stude	ent Agreement	
Studen	nt Name:	<u>-</u>
immed	e to abide by the Code of Conduct and acknowledge that liate removal from the Winter Formal, without a refund- ine or corrective action may be taken.	
Studen	nt Signature:	Date:
Parer	nt Consent	
Parent	Name:	-
	by consent that my student may attend the Winter Form be any Breach of Conduct.	nal and understand the implications should
Parent	Signature:	Date:
	ary Concerns by food allergies/restrictions:	

Date: ___