

Keheley Elementary Annual Fall Festival

Friday, October 14th
5:00p.m. to 7:30p.m.

Bring your whole family to our Fun Filled Fall Festival!

Purchase your Pre-Paid wristband today and save! Your ticket price includes all inflatables, games, prizes and entertainment. Be sure to bring extra cash for snacks. This year we will feature a DJ, Showtime Entertainment Photo Booth \$1, rock wall to climb, trackless train, Michelle from Salon MD will do hair art, Glamour Girl Day Spa will do face painting, and MagicMan Entertainment will make Balloon creations. Our Cake/Cookie walk will have live music by McCleskey Middle School Band. We will be serving Chick-Fil-A and Pizza from CiCi's Pizza. The snack table will feature Rita's Italian Ice and Caramel Apples from Chocolate Jewels.

Pre-Ordered Wristband Prices: (Adults and children under 2 are free)

5 years and up \$10
3 and 4 years \$5

Pre-Order Meal Tickets:

Choices for meal: Chick-fil-A 8 piece chicken nuggets or Chicken Sandwich \$5
2 Slices of CiCi's Pizza Cheese or Pepperoni \$5

CHICK-FIL-A ONLY AVAILABLE FOR PRE-ORDERS

all meals include chips, and drink. Only a limited number of extras will be ordered.

Price for a meal on night of event \$6. Wristbands will be \$12 for 5yrs and up, \$7 for 3-4 yrs. old at the door. Complete the form below, sign waiver for inflatables and return with payment to your child's teacher by October 7th.

Please make checks payable to Keheley PTA and place in an envelope marked **FALL FESTIVAL**. Please Print. Tickets will be at Pre-Purchased Wristband table on night of event.

Last Name: _____ Phone: _____

Wristbands: \$10 X _____ = _____
\$5 X _____ = _____

Meals: CiCi's Pizza \$5 X _____ = _____ Cheese _____ Pepperoni
Chick fil A Nuggets \$5 X _____ = _____
Chick fil A Sandwich \$5 X _____ = _____

Total Meals and Wristbands: \$ _____

Please sign Waiver for Inflatables. No admission unless signed waiver is presented.

I agree to release, indemnify, and hold harmless the Cobb County School District, its Board of Education, and its employees, agents, or assignees, as well as its approved adult trip supervisors ("District Indemnities") from and forever promise not to sue them on any and all claims, demands, right, cause of action, liabilities, losses, damages, cost and expenses (including reasonable attorneys' fees), whether known or unknown, that I, any other parent or guardian of the named student and siblings, or the student/siblings may have or may allege to have against the District Indemnities or which may be brought against the District Indemnities arising out of or in any manner relating to the student's participation in the Fall Festival, including but not limited to the rendering of emergency medical procedures or treatment.

Student Name

Student Name

Student Name

Name of Parent/Guardian
(Please Print)

Signature of Parent/Guardian

Date

If you have any questions please contact: Karen McElvaney 678-849-6849 or mcelvaney4@gmail.com

For Office Use: ___ Cash ___ Check#