## **TCHS Graduation Ticket Declaration Form**

I acknowledge and understand that each graduating senior is allotted up to seven (7) tickets for seating at the ceremony on Saturday, May 25, 2019 at 4 p.m.

I acknowledge and understand that I have the option to decline any or all of the tickets allotted to my graduating senior(s).

I acknowledge and understand that if I decline any or all of the ticket allotment, I will not be able to make a request for additional tickets at a later time.

I acknowledge and understand that I can only use this form to make a request for additional tickets above the allotment.

I acknowledge and understand that a <u>request</u> for additional tickets is <u>not guaranteed</u> and may be subject to a two-ticket cap if my request is selected in the lottery.

## This form must be returned to Mrs. Courtney Johnson no later than *Friday*, *February 22*, 2019 at 4 p.m.

The following is my declaration:	
I am <u>returning</u> of th	ne seven (7) tickets allotted per senior.
I am <u>requesting</u> tickets <b>in ad</b>	dition to the seven (7) tickets allotted per senior.
2019 Senior Name	Student ID
Parent Name	Phone
Student Signature	Date
Parent Signature	Date
FOR KISD	OFFICAL USE ONLY
Received By	
Date Received	
Lottery Selected	
Total Additional Tickets Allotted	