



Congratulations Class of 2017!

Graduation Information:

Date: June 2, 2017

Time: 7:00 p.m.

Location: Northern Illinois Convocation Center,
1525 W. Lincoln Highway, DeKalb, IL 60115

**Please look for a detailed letter emailed to
all seniors and their parents mid-March.*



CLASS OF 2017

Northern Illinois Convocation Center
1525 W. Lincoln Hwy
DeKalb, IL 60115

**Graduating seniors should report to the Convocation Center at NIU by 6:00 p.m. Please enter the building through Door 5.*

**Welcome to the
NIU Convocation Center**

For your safety, we will perform a courtesy search as you enter the building. Please be prepared for a search of purses, coats, or pockets. We ask that you **NOT** bring in the following items:

PROHIBITED ITEMS:

- Bags, backpacks, duffels (small purses okay)
- Laser pointers of any kind
- Coolers, bottles, cans, containers, or projectiles
- Weapons, flammables, or other potentially dangerous items
- Aerosol containers (including hairspray), or any pressurized container
- Food or beverages
- Horns, noisemakers, whistles, or banners
- Long-lens cameras
- Any illegal substances
- Posters, signs, or banners on sticks
- Helium balloons
- Umbrellas
- Mono-pods, tri-pods, selfie sticks
- Posters, signs, or banners
- Strollers are also not allowed, as the facility does not have a storage area for them.

Guests possessing prohibited items must return these items to their vehicles or dispose of them before entry is granted. Guests who refuse this inspection will not be admitted. Guests may bring in a 20 oz. or smaller sealed water bottle.

www.niuconvo.com

Congratulations Graduates!



Convocation Center

Northern Illinois University

Parking:

Parents: please park in Lot C2 and enter through Door 4

Handicap parking is in Lot C4 and enters through Door 5

CHS GRADUATE YARD SIGN ORDER FORM

**PLASTIC SIGN WITH
METAL STAKE
\$15**



QUANTITY _____

**PLASTIC SIGN WITH
METAL STAKE AND
COLLEGE/UNIVERSITY
\$20**



COLLEGE/UNIVERSITY

QUANTITY _____

TOTAL # OF ITEMS _____ **TOTAL \$** _____

STUDENT NAME _____

PARENT NAME _____

PARENT EMAIL _____

PARENT PHONE # _____

COMPLETE HOME ADDRESS FOR HOME DELIVERY

DUE DATE: APRIL 16th

**Return forms with Cash or Check made out to
Central Athletic Boosters to CHS Athletic Office Booster Club Mailbox.**

Call Brian Andersen 847/254-1228 with any questions.