

Mr. Jason Graham, Principal

CALLAWAY HIGH SCHOOL
221 Whitfield Road
Hogansville, GA 30230
(706) 845-2070

Ms. Shalanda Lovett, Registrar
Mrs. Memory Snellgrove, Asst. Principal
Mr. Christopher Phelps, Asst. Principal

****NO DATES AGE 21 OR OLDER** Return form and \$20.00 to Mrs. Mapp by APRIL 14, 2023**

NON-CALLAWAY HIGH STUDENT DATE PERMISSION FORM: 2022-2023

CHS Student Name _____ Grade: _____

Guest Name: _____ DOB: _____

I _____ give _____ permission to attend an
(parent of student/guest) (Student/guest name)

Activity sponsored by Callaway High School (Junior/Senior Prom) at the Del'avant in LaGrange GA. I understand that appropriate behavior is expected. Guests not conducting themselves in an appropriate manner will be instructed to leave the event and event property.

Guest (student) Signature: _____

Parent/Guardian of Guest Signature: _____ Contact # _____

CHS Student Signature: _____

CHS Parent/Guardian Signature: _____ Contact # _____

If Guest (student) is attending High School:

Name of High School: _____ Grade: _____

High School Phone Number: _____

To be completed by Guest's High School Principal:

I attest that the above mentioned student is in good standing at our High School: YES or NO

_____ Date: _____

Principal's Signature

If guest is a High School Graduate: (Dates will have to be approved by CHS Principal)

Name of High School attended: _____ Year: _____

Age: _____ (As of March 2023) Phone number of High School: _____

Name of College/University/Technical School or Employer: _____

Jason Graham, Principal Approval Signature

Mr. Jason Graham, Principal

CALLAWAY HIGH SCHOOL
221 Whitfield Road
Hogansville, GA 30230
(706) 845-2070

Ms. Shalanda Lovett, Registrar
Mrs. Memory Snellgrove, Asst. Principal
Mr. Christopher Phelps, Asst. Principal

****NO DATES AGE 21 OR OLDER** Return form and \$20.00 to Mrs. Mapp by APRIL 14, 2023**

NON-CALLAWAY HIGH STUDENT DATE PERMISSION FORM: 2022-2023