

Freshman/Sophomore Semi-Formal Permission Form

Guest Name	Date of Birth	Home	Phone	
Address	Parent / Guardian Name			
City, State, ZIP				
Malden Catholic Student Name				
Guest Signature		D	ate	
Guest Parent/ Guardian Signature		Date		
Emergency Contact – Name		Phone #		
<u>To be complete</u> Malden Catholic High School has a gu	d by School Administrat est policy. The above na			
by an MC student to attend this year				
7:00pm to 10:00pm held in the Dohe	rty Gymnasium Malden	Catholic Hig	gh School. The	
student must be currently in grade 9	or 10.			
School Attending		Phone #		
Is the student currently in good standi	ing in your school?	YES	NO	
Do you know of any reason why this si	tudent should			
be excluded as a guest at our school fu	unction?	YES	NO	
Name of person filling out form		Title	e	
Signature	Pho	ne	Date	
Guest must pro Please return these completed fo	ovide a school ID when orms to the front desk	-		



Student Conduct, Inside or Outside of School

The student is a Malden Catholic student at all times. A student who engages in conduct, whether inside or outside of school, that is detrimental to the reputation of the school and/or poses a threat to the safety or well-being of Malden Catholic students or faculty, may be disciplined by the Administration. Sanctions may include suspension or expulsion.

Malden Catholic Student	Print
Signature	Date
Parent /Guardian	Print
Signature	Date
Emergency Contact Name	
Cell Phone #	