



APPROVED: \_\_\_\_\_

# Laguna Beach High School Guest Contract

LBHS Winter Formal  
Saturday, February 3, 2024  
Coto Valley Country Club  
23331 Via Venado, Coto de Caza, CA 92679  
8:00 pm - 11:00 pm

To bring one (1) non-LBHS guest to the dance, complete and return this form to your Administrator by **Feb. 1, 2024**. Please note that the due date is **NOT** flexible. LBHS will **NOT** approve late guest passes. No tickets sold at the door.

### LBHS welcomes guests from other schools to the dance under the following conditions:

- Guests must be age 20 and under.
- Guests must follow the LBHS Code of Conduct/Dress Code.
- Guests must arrive by 9:00 PM **with** LBHS student.
- Students/guests leaving dance will **not** be allowed re-entry.
- Guests must be in 9th grade or above.
- Guests **must** present photo ID at the door.
- Dancing must be appropriate or **all** will be asked to leave.
- LBHS reserves the right to refuse entrance of **any** guest.

### SAFE AND SOBER EVENT POLICY

To support and promote safe and sober events, LBHS will enforce the following policies at all dances:

- Any student in possession, under the influence, or suspected to be under the influence will be removed from the event and a parent will be notified to pick up their student.
- Students arriving in limousines and buses must remain in the vehicle upon arrival until the vehicle has been searched and cleared by a school administrator or designee.
- Students may be subject to random searches and/or breathalyzer tests.

### LAGUNA BEACH STUDENT INFORMATION (LBHS students must meet **all** requirements per Student Handbook):

LBHS Student Name:	Grade:
LBHS Parent/Guardian Name (print):	Phone:
LBHS Parent/Guardian Signature:	

### GUEST STUDENT INFORMATION (Guest must attach a legible copy of their school picture ID or driver's license):

Guest Student Name:	Date of Birth:
Guest's Parent/Guardian Name (print):	Guest's Age:
Guest's Parent/Guardian Signature:	Emergency Phone:
Allergies/Medical Conditions:	

### GUEST STUDENT'S HIGH SCHOOL INFORMATION (to be completed by Guest's high school Administrator):

Guest's High School Name:	Phone:
Name of Administrator (print):	Position:
Administrator's Signature:	Date:

*I certify that the above-mentioned student is currently in good standing at our school and have attached my business card.\*\*\**

**By signing above, you agree to LBHS Safe and Sober Event Policy and accept all other conditions outlined in this contract.**