

MOUNT SI HIGH SCHOOL DANCE GUEST FORM

Dance: MOHAI Due Date: May 31, 3:00 P.M.

Mount Si High School Administration reserves the right to refuse admittance to any dance guest who has not thoroughly completed this process.

- Guest must bring their current student ID card/valid form of ID **AND** ticket to the dance. There will be no ticket sales at the door.
- Guest must enter and exit the dance with their Mount Si High School / SVSD Resident host student.
- Guest must be a sophomore in high school and no older than 20 years old. Guests who have graduated from high school or not enrolled in a program will need to go through a police background check.
- The Mount Si High School / SVSD Resident student is responsible for the behavior and demeanor of their guest while at the dance.
- Failure to abide by ALL school rules will result in removal of both the Mount Si High School / SVSD Resident Student and their guest, along with any disciplinary actions under Policy 3241 and Procedure 3241P for the Mount Si High School / SVSD Resident student and a direct communication with the administration of the Guest's school/program.

Senior Mount Si High School Student Senior SVSD Resident at: TR PPP GA

Name: _____	Grade: _____	Student ID #: _____
I will abide by Mount Si High School's rules, regulations and requests of the adults supervising/chaperoning the dance. I will also be responsible for the actions/behaviors of my guest.		
		_____ (MSHS Student Signature)
I approve of my student's request to bring a guest to the dance and have read and agree to the terms stated above. In the event of an emergency, I also agree to take full responsibility of my student's guest.		
		_____ (Print - Parent / Guardian Name)
		_____ (Parent / Guardian Signature)

Guest Info: Guest must be a Sophomore in high school and no older than 20 years old.

<input type="checkbox"/> High school student: School _____ The guest named below has an acceptable behavior record, is eligible to attend events at our school, and is therefore eligible for this Mount Si High School dance. <input type="checkbox"/> An Administrator's business card is attached. Admin Signature: _____	<input type="checkbox"/> Graduated or currently not in a program (SRO will conduct a background check) SRO Signature: _____
Name: _____ Grade: _____ School: _____	
Birthday: _____ Age: _____ Guest Phone #: _____	
Do you have a life-threatening medical condition: <input type="checkbox"/> Yes <input type="checkbox"/> No	
• If you marked "Yes", it is your responsibility to communicate your medical condition/need, especially if you self-carry rescue medication.	
Parent/Guardian Contact Name: _____	Parent/Guardian Contact Phone#: _____
As a guest, I agree to abide by Mount Si High School's rules, regulations and the requests of the adults supervising/chaperoning the dance.	
<input type="checkbox"/> I have attached a copy of my current student ID/valid form of ID	
_____ (Guest Signature)	
I approve of my child to attend a dance at Mount Si High School and have read and agree to the terms stated above.	
_____ (Print - Parent / Guardian Name)	
_____ (Parent / Guardian Signature)	