

**ORANGE BEACH HIGH SCHOOL OUTSIDE DATE REQUEST FORM**

**Orange Beach Event Center September 7, 2024 7-10pm**



Form Due: by **September 6th to office**

Tickets will not be sold to outside guests at the door.

A student requesting to bring a date who is NOT a student at OBHS must have this form completed and turned in to our main office. **Students who have not completed forms will not be able to enter the dance.** The admittance of an outside date requires the approval of an Administrator. **Please be advised that tickets should not be bought until your guest's administrator has approved your guest and signed your form.** OBHS has the right to deny entry to any person.

**NO MIDDLE SCHOOL STUDENTS OR GUESTS OVER THE AGE OF 19 WILL BE ALLOWED.**

As an OBHS student, I understand that all OBHS rules apply at school and social functions. I will take **FULL RESPONSIBILITY** to inform and ensure my date follows the rules (including the dress code). My date must provide a copy of a photo ID (Student ID, Driver's license; ect.) to enter the dance.

**\*\*\*GET THIS FORM ON FILE IN MAIN OFFICE AT SCHOOL WHEN COMPLETE\*\*\***

\_\_\_\_\_  
OBHS Student Name (please print)

\_\_\_\_\_  
Signature of OBHS Student

\_\_\_\_\_  
Today's Date

\_\_\_\_\_  
Grade Level

As an Orange Beach High School Parent/Guardian of the above OBHS student, I find their date to be a responsible person and I approve them as an acceptable guest for this OBHS social functions.

\_\_\_\_\_  
Signature of OBHS Parent of Guardian

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Phone #

**\*\*\*Date/Guest Information (Please Print)\*\*\*\***

**Attach a copy of your guest's photo ID**

A student without a photo ID must provide a photo of himself/herself notarized "as said student" by school personnel.

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

School: \_\_\_\_\_

Driver's License #: \_\_\_\_\_

As an Administrator of the school this student attends, I verify that he/she is a student in good standing.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Phone #

If not a student, please list the following:

Employer and phone #: \_\_\_\_\_

Employer Signature: \_\_\_\_\_

As a guest of an OBHS student, I understand that all OBHS rules apply to me and agree to follow them.

\_\_\_\_\_  
Guest Signature

\_\_\_\_\_  
OBHS Administrator