



# Conrad Schools of Science HOMECOMING GUEST REGISTRATION FORM

High School Homecoming  
Saturday, October 26, 2024 from 7:00 - 10:00 PM

Conrad Schools of Science  
201 Jackson Ave, Wilmington, DE 19804

Mr. Rappa

## Students & Guests may NOT leave before 9:30 PM

The following form must be completed and signed by the parent/guardian of the CSS student, the parent/guardian of the Guest student, the school Administrator of the Guest student and Mr. Rappa. The Guest student must be a high school student or high school graduate 20 years old or younger on the day of the dance. The completed form, with all approvals signed, is turned in at the time the guest ticket is purchased.

**To attend a Red Clay high school dance or prom, the attendee must be 20 years old or younger on the day of the dance. The guest must provide a copy of his or her driver's license prior to ticket purchase.**

**Parent/Guardian and administrator signatures are not required for high school graduates 20 years old or younger.** Students attending the school sponsored dance are expected to govern their dress, dancing, and behavior in line with the District Code of Conduct and the Conrad Way. Students must cooperate with requests from staff and volunteer chaperones.

CSS Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Phone: \_\_\_\_\_ Phone: \_\_\_\_\_  
Print Name Day Evening

*I give my permission for the guest listed below to attend the CSS High School Junior/Senior Prom with my child. My signature below signifies that I will assume responsibility for the actions of my child and his/her guest during all school related activities. In the event of a problem, I also agree to come to the school as requested and escort my child and his/her guest from the site.*

\_\_\_\_\_ Date  
CSS Parent/Guardian Signature

Guest Name: \_\_\_\_\_ Age: \_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade: \_\_\_\_

Parent/Guardian: \_\_\_\_\_ Phone: \_\_\_\_\_ Phone: \_\_\_\_\_  
Print Name Day Evening

*As the parent/guardian of the above named guest at Conrad Schools of Science activities, I give my permission for my child to attend these functions and to have the above named parent act as my representative.*

\_\_\_\_\_ Date  
Guest Parent/Guardian Signature

School Guest Attends: \_\_\_\_\_ Grade: \_\_\_\_\_

Administrator Name: \_\_\_\_\_ Phone: \_\_\_\_\_ e-mail: \_\_\_\_\_  
Guest's Administrator (print)

*As the administrator of the above named guest at Conrad Schools of Science activities, I certify that the guest is an upstanding citizen and a good representative of our school.*

\_\_\_\_\_ Date  
Signature