2025 Alpharetta High School Prom Guest Permission Form



Please read and print information on form carefully. By signing below, you indicate that you understand and agree to the contents of this entire form. This form must be submitted by Friday, April 4 to Mrs. Talele in Suite 1255, AND a copy of the guest's picture ID which includes their birthdate must be attached to this form.

NOTE: Every AHS junior and senior can only bring ONE outside guest to prom.

AHS Student information

Name:			Grade:	
First	Middle	Last		
My child named above has my permission to bring			(Guest name) to	
Alpharetta High School's Prom on	Saturday, April 19, 2025 at	the Fox Theatre in Atl	anta, Georgia.	
AHS Student Parent/Guardian Signa	iture:			
	Guest Informa	ation_		
Guest's Name			Grade:	
First	Middle	Last		
Guest Age (no guest may be in midd	lle school OR over the age of	20):		
Guest has a special medical condition	on:No			
If yes, please explain:				
Guest's School Name:				
For the Guest's School Administrate similar event at our school.	or (only if in high school): The	student listed above wo	uld be allowed to attend a	
Guest's Administrator Signature: D			ate:	
Guest's Home Address:				
Guest's Parent/Guardian Name:				
Guest's Home Phone:	Guest's Parent Cell Phone:			
l,	(Guest parent/gua	rdian), give permission f	or my child to attend the AHS	
Prom on Saturday, April 19, 2025 at	, ,		•	
event of a rules infraction, I understa this event site.	and that I will be contacted an	d I will make arrangemei	nts to retrieve my child from	
Guest's Parent Signature:		Date:		