ASHLAND HIGH SCHOOL GUEST DANCE FORM

We want every school dance to be a safe, fun, and memorable event for all students. Please read these expectations carefully before purchasing a ticket or attending a dance. All students and guests must follow these expectations at every AHS-sponsored dance or event. The administration reserves the right to deny entry or remove any student or guest whose conduct, appearance, or behavior is inconsistent with school expectations. Students who have been suspended or expelled for fighting at any point during their career may not attend without first setting up a meeting with high school administration.

General Expectations

- All dances are school-sponsored events. All AHS and Ashland City Schools rules and policies apply, including the Code of Conduct.
- Students who leave the dance for any reason may not re-enter.
- Bags, backpacks, water bottles, and coats are not permitted and if brought will be kept in a separate room. Small purses (clutches) are allowable but subject to inspection by administration. Complimentary water will be available inside the dance.
- Tickets are non-refundable unless the dance is canceled due to inclement weather and unable to be held on a different date.

Dancing Expectations

Ashland High School expects all dancing to reflect good judgment, modesty, and respect for others.
The following apply to all AHS dances:

- Students may dance near or behind others, but dancing in a back-to-front position with physical contact between partners is not permitted.
- Inappropriate or sexually explicit dancing, running, jumping on others, flips, lifts, or “mosh-pit” style dancing are not permitted.

Guest Policy

- Each AHS student may bring one (1) guest.
- **Guests must be current high school students or recent graduates who are no older than 20 years old. Middle school students are not permitted. All guest applications must be approved by AHS administration at least the day prior to the event.**
- Guests must arrive and leave with their host AHS student

GUEST FORM ON BACK

Name of Ashland High School Student_____

_____ _____

AHS Parent/Legal Guardian Printed Name AHS Parent/Legal Guardian Signature

Information about the Guest of AHS Student:

Name of Student_____

School Attending_____ Grade _____ Age_____ DOB_____

Name of Emergency Contact for Student_____

Address of Emergency Contact Person_____

Emergency Contact Relationship (Mom/Dad/Grandparent/etc.) _____

Emergency Contact Phone Number_____

Granting Consent

In the event reasonable attempts to contact me have been unsuccessful, I hereby give my consent for the administration of any treatment deemed necessary by a licensed physician or dentist and the transfer of the child to any hospital reasonably accessible. This authorization does not cover major surgery unless the medical opinions of two other licensed physicians or dentists concurring in the necessity for such surgery are obtained prior to the performance of such surgery.

_____ _____

Guest Parent/Guardian Name Date

_____

Guest Parent/Guardian Signature

Refusing Consent

I do not give my consent for emergency medical treatment of my child. In the event of illness or injury requiring emergency treatment I wish the school authorities to take the following action:

_____

_____

_____

_____ _____

Guest Parent/Guardian Name Date

_____

Guest Parent/Guardian Signature

Guest School Administrator: I certify that the student listed above is in good standing and has had no disciplinary issues that would compromise safety at a school dance.

_____ _____

Guest School Administrator Printed Name Guest School Administrator Signature