

NON-HOBAN GUEST PASS - Homecoming October 10, 2026

The non-Hoban guest must be at least in Grade 9 and not older than 20 years.

The dance will be held outside from 7:00 PM to 10:00 PM. Students can begin to

leave at 9:45 PM. **FORMS ARE DUE ON WED, OCTOBER 7th @ 7:55AM!**

One guest per Hoban student. Non-Hoban guest must arrive with Hoban Student.



Hoban Student Name: _____

Guest Name: _____ Age: _____ Grade: _____

Guest Address: _____ Guest Phone Number: _____

Student Guest Signature: _____ Date: _____

Guest Parent/Guardian Signature: _____ Date: _____

High School Student

Name of high school you currently attend: _____

Did this student ever attend Hoban: YES / NO

High School Address: _____

Phone Number: _____

High School Administrator: Please sign and date this form if the above named student is currently enrolled at your school and is in good standing.

Administrator Name (Please Print): _____

Administrator Signature: _____ Date: _____

High School Graduate/College Student

All high school graduates must present their I.D. or Driver's License at the doors. What year did you graduate? _____

Did this student ever attend Hoban: YES / NO

Name of college currently attending: _____

By signing this contract, I agree that as a guest of Archbishop Hoban High School, I understand that I must conduct myself in an orderly manner, and that I am subject to all Hoban rules and responsibilities, most particularly the drug and alcohol policy, the dress and behavior code, as well as the dancing guidelines. I further understand that my Hoban escort is subject to disciplinary action based on my behavior and actions.

Guest Signature: _____ Date: _____

I understand that by signing this contract: 1) My student is subject to the aforementioned rules and regulations, 2) I will be called if my student does not show up to said event in a timely manner, and 3) I may be required to pick up my child if there are any behavioral issues.

Hoban Student Signature: _____ Date: _____

Hoban Parent Signature: _____ Date: _____

Hoban Administrator Signature: _____ Date: _____