



Lake Washington High School 2026-2027 Guest Pass Request

*This form must be completed and submitted when purchasing tickets. No guest ticket will be purchased without this form.
Guests will pay non-ASB ticket price. One guest per LW student.*

LWHS Student Name: _____ Dance: _____ Date of Dance: _____

LWHS Parent Name: _____ Parent Phone Number: (____) _____

LWHS Parent Signature: _____

LWHS Guest Expectations

- **PICTURE ID IS REQUIRED upon entrance to the dance.** If in high school, ID should be school issued. If post high school, ID must be state/government issued (e.g. Driver's License)
- Once you leave the dance for any reason, you are not allowed to re-enter
- Behavior at school dances will be closely monitored. Possession of or being under the influence of any controlled substance is prohibited. Police will be contacted. **A breathalyzer may be used at the discretion of the police officer on duty.**
- Guests must be no younger than a 9th grader and no older than 20 years of age.
- All school rules apply. Students or guests wearing revealing attire or/with inappropriate sayings or graphics will be sent home. The administrator in charge will determine what is revealing or inappropriate.
- Students will be sent home for any dancing that is perceived as overly sexually suggestive or inappropriate. The administrator in charge will determine what is overly sexually suggestive or inappropriate.

If GUEST currently attends high school – *complete this section*

Name of High School Guest Attends: _____

Guest Name: _____ Guest Signature: _____

Guest's Parent Name: _____ Guest's Parent Signature: _____

Guest's Parent Phone number: (____) _____

Administrator Signature from Guest School: _____

The administrator's signature indicates the student is in good standing at their school.

A business card from the administrator must be attached to this form

A copy of a Guest's Driver License or Student ID must be attached.

This portion must be completed prior to obtaining a signature from an LW admin.

If GUEST is out of school – *complete this section*

Guest Name: _____ Birthdate ____/____/____ Age of Guest _____

Address of Guest: _____ Guest Signature: _____

Guest's Parent Name (please print): _____

Phone Number of Guest: (____) _____ Phone Number of Guest's Parent (____) _____

A copy of a Guest's Driver License or Student ID must be attached.

LAST step: **Final LWHS Administrator Approval:** _____

Last Name A-EI: Cardakli | Last Name EL-LA: Kooima | Last Name LE-RE: McNeal | Last Name RH-Z: Bosch