



# Guest Pass Request for School Functions

WVHS Event you are Requesting Guest Approval for: \_\_\_\_\_

## Walton-Verona High School Student Information

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_\_

Student Address: \_\_\_\_\_

Parent / Guardian Name: \_\_\_\_\_

Parent / Guardian Signature: \_\_\_\_\_

Student Signature: \_\_\_\_\_

## Guest Information

\_\_\_\_\_ Birth Date: \_\_\_\_\_

Last, First Middle month/date/year

School: \_\_\_\_\_ Grad Year: \_\_\_\_\_

School Phone #: (\_\_\_\_) \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_

Guest's Parent/Guardian Name: \_\_\_\_\_

Guest's Parent/Guardian Signature: \_\_\_\_\_

Guest's Signature: \_\_\_\_\_

*All guest will be held to the Walton-Verona High School Code of Conduct and Walton-Verona Board of Education rules while in attendance at a Walton-Verona event. While in attendance, the Walton-Verona student will accept all responsibility for their guest and their actions.*

*No Middle School students and the Guests must be under the age of 21 on the date of the event.*

<b>To be complete by the ADMINISTRATION of the <u>Guest's High School</u></b>		
_____ APPROVED	_____	_____
_____ DENIED	Principal / Designee Signature	Date

Guest School Administrator, please complete and forward to Walton-Verona High School.