GUEST ~ PROM APPLICATION

KNIGHT HIGH SCHOOL

JUNIOR/SENIOR PROM - Saturday, April 2, 2022

Guest Pass App due by Feb 18th

This application must be completed and turned in to the KHS Activities Office prior to purchasing prom tickets. Tickets will be sold at the student store or online from January 31st-February 25th. Tickets will be sold on a first come first serve basis and guest tickets are limited. The KHS student will be notified if a guest application is <u>not</u> approved and they will be allowed a "name change" by completing a new guest application (which is due by March 18th). No refunds will be given if a guest ticket is purchased before this application is approved and the guest is denied. Emergency contact numbers and picture IDs are required for <u>ALL</u> persons attending the KHS Prom; including guests. If the information provided on this application is falsified you may be denied to attend the dance, even as a KHS student. The KHS student and their parent/guardian must sign the application to indicate they understand and agree to the conditions of this application. The guest and their parent/guardian must also sign the permission slip (regardless of guests' age).

KHS Student Name:	Signature:	ID #	Grade:
KHS Student's Parent/Guardian:	Parent/Guardian Signature:		
***PLEASE HAVE YOUR G (All guests must be 20 yrs. or yo	GUEST COMPLETE THE FOLLO ounger, attending high school ar		- '
Guest Name:	Phone #:	Birth Da	te:
Check the box if applicable to guest: \Box OS	C Student ☐ Early GRAD ☐ Unde	erclassmen	
If the guest is a KHS Student, the following of	charges must be cleared: Attendance	Library	ASB
 I agree to comply with the dress cod I understand I need to attach a copy I understand I will need to bring a continuous 	and conditions listed on the 2022 Pro le regulations and all KHS policies. <mark>(G</mark> of my current school ID or picture II current school ID or picture ID for add ds allowed due to prepaid reservations.	Guest Initials) O to this application (mittance. (Guest Init	(Guest Initials) ials)
Guest Signature:	Home Phone#:		
Parent Signature:	Cell Phone #:		
Emergency Contact:	Cell Phone #:		
HIGH SCHOOL STUDENTS MUST HAV	THE FOLLOWING INFORMATION	FILLED OUT BY TH	IEIR SCHOOL
The student named above has not been refe (Please affix adm	erred to a dean/vice principal for serio ninistrators' card or school stamp to this pe		the last six months.
Administrator/Secretary Print Name:		Phone:	
Administrator/Secretary Signature:		Date:	
NON-HIGH SCHOOL ST	UDENTS MUST PROVIDE EMPLOYI	ER INFORMATION	
Name of Employer:	City:		
Supervisor Name:	Supervisor Phone Number:		
STOP – THE FOLLOWING SE	ECTION IS TO BE COMPLETED BU TH	HE KHS ACTIVITIES	OFFICE
Activities Secretary/Admin Signature:	Date:	Approved:	Denied: