## **Date Request Form**

Name of Event\_\_\_\_\_

Directions: A student requesting to bring a completed and returned to the High Schosignature of the Principal/Administrator of ninth grade and the guest must be less person. Only one guest per GSWHS students	ol office <u>5 DAYS BEFORE</u> the the guest's school. <b>The mini</b> than 21 years old. A parent	event. This form requires the mum grade level for all guests is /guardian must sign as a contact			
GSWHS STUDENT					
	Y				
GSWHS Student Name (Printed)	GSWHS Student Signature	Date			
As the parent of the GSWHS student, I for date as an acceptable guest for this GSV non-refundable.					
XGSWHS Parent/Guardian Signature	Date				
GUEST INFORMATION					
Guests Name (Printed) Date	//_ e of Birth Age Address	3			
City Parer	t Name (Print)	Parent Primary Number			
If your guest attends a different high school, the following portion is required. Dean or Administrator must fill out the information below.  As Administrator of the high school this student attends, I verify that he/she is a student in good standing.					
Name of School/City	Name of De	an/Administrator of guest (Printed)			
Signature of School Dean/Administrator	of guest Date	Phone number and extension			
If not currently attending high school, list one of the following					
Employer	Employer Phone Number	_			
Character Reference Name	Phone Number	_			
Gardner South Wilmington Administrator Approval  Signature  Date					