



Principal's Approval _____ Date: _____

OUT-OF-SCHOOL GUEST REQUEST FORM FOR DANCES/ACTIVITIES

A student requesting to bring a date/guest who is not an Our Lady Academy student to a school-sponsored dance/activity must have this form completed and returned to the office for approval at least three school days prior to the date of the event. Dates of the same gender are not permitted at Our Lady Academy dances/activities. The guest must be in good standing at his high school and must present photo identification. This form requires the signature of the principal or administrator of the guest's school. The Our Lady Academy administration reserves the right to decline the request of any outside guest.

Name of Event: _____ Date of Event: _____

OUR LADY ACADEMY STUDENT / PARENT AGREEMENT:

As an Our Lady Academy student, I understand that all Our Lady Academy rules apply at any school function. I am aware that my guest and I must arrive and leave at the same time. I am also aware that once my guest and I leave, we will not be allowed to return for any reason. Further, I understand that I am not only responsible for my behavior but also for the behavior of my guest at this event. If he cannot follow the policies and procedures of Our Lady Academy, we will be asked to leave, and I will be held responsible.

Our Lady Academy Student's Name _____ Grade _____

Our Lady Academy Student's Signature _____ Date _____

As the parent of the above-named Our Lady Academy student, I find her guest to be a responsible person and I approve him as an acceptable guest for the Our Lady Academy event. Further, I understand that my child will be held responsible for the behavior of her guest.

Name of Parent (Print) _____ Date _____

Parent Signature _____

Emergency Contact Name / Phone Number _____

GUEST INFORMATION

As a guest at this Our Lady Academy event, I understand that I must abide by all policies and procedures that apply to Our Lady Academy students while attending this event.

Name of Guest (Print) _____ School _____ Grade _____

Guest Signature _____ Date _____

Parent of Guest (Print) _____ Date _____

Parent of Guest Signature _____ Date _____

Emergency Contact Name / Phone Number _____

TO BE COMPLETED BY GUEST'S SCHOOL:

To the best of my knowledge, the above student is in good standing and has permission to attend this Our Lady Academy event.

Guest Principal (PLEASE PRINT) _____ School: _____

Signature of Guest Principal _____ Date _____