Received in Student Services on						
by Date	Secretary					
Info verified by	YES NO					
Admin Signature Indicating Approval						

## River Ridge High School

11646 Town Center Road \* New Port Richey, Florida \* 34654 Phone: 727.774.7200 \* 813.794.7200 \* 352.524.7200

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## Dr. Toni Zetzsche, Principal

Ronald Bruno, Assistant Principal • Douglas Elias, Assistant Principal • Jessica Meek, Assistant Principal • Janene Sullivan, Assistant Principal

## WELCOME TO MOONLIT KNIGHTS: 2016 JUNIOR/SENIOR PROM PROM GUEST REQUEST FORM

A student requesting to bring a guest who is not a RRHS student must have this form completed and returned to Mr. Bruno in Student Services **before** you purchase your tickets. The dance policy allows a RRHS to bring one guest who must be 20 or younger. No middle school students are allowed to high school dances. Please submit this form to RRHS, student services, during the week of **April 25-29**. As per district policy, to participate in extracurricular activities, any currently enrolled students may **NOT** have more than 10 *unexcused* absences in any one period in the 90-day period prior to the event.

As a RRHS student, I understand that all RRHS and county policies apply at school functions. All guests are required to abide with the expectations of RRHS students. I will take responsibility to inform my guest and ensure full compliance of these policies. My guest must have current photo identification in his/her possession and present it at the door upon entering.

RRHS Student's Name	Signature of RRHS Student		ID #		Grade	Date
As the parent/guardian of him/her as an acceptable	the above named RRHS stud guest for this RRHS event.	dent, I find h	iis/her gue	est to be a resp	onsible perso	n, and I approve
Signature of Parent of RRHS	Student		Phone #			Date
* * * * * * * * * * * * *	* * * * * * * * * * * * * *	* * * * * *	* * * * *	* * * * * * *	* * * * * * *	* * * * * * * * *
GUEST INFORMATION						
Is the guest a current Pasco	County Schools student:	🔲 no	🗌 yes	School ID# _		Grade
Is the guest a former Pasco	County Schools student:	🗌 no	🗆 yes	School ID# _		
If the guest has a Driver's Li	cense or State ID, please pro	ovide the #				
Guest's Name (please print	)	_	D	ate of birth		-
Guest's Home Address		_	 P	hone #		-
Guest's School (past or pr	esent)	_	S	chool Phone #		_
Signature of Guest's Parent	;		Ģ	Guest Parent Ph	one #	-