Received in Student Services on						
by Date	Secretary					
Info verified by	YES	NO				
Admin Signature Ind	icating App	roval				

## River Ridge High School (

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

Fax: 727.774.7291 \* http://rrhs.pasco.k12.fl.us



## Dr. Toni Zetzsche, Principal

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

## A Knight On The Runway: 2017 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. Elias 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 3rd-7th**. 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 semester 2

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 Stuc	dent	ID #		Grade	Date
As the parent/guardian of th him/her as an acceptable g		dent, I find I	nis/her gu	uest 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 Lice	ense or State ID, please pro	ovide the #				
Guest's Name (please print)		_		Date of birth		-
Guest's Home Address		_		Phone #		-
Guest's School (past or pres	sent)	_		School Phone #		-
Signature of Guest's Parent		_		Guest Parent Ph	one #	-