

# River Ridge High School

## Prom Guest Form

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

<http://rrhs.pasco.k12.fl.us>



**Dr. Toni Zetzsche, Principal**

**Ronald Bruno, Assistant Principal • Jessica Meek, Assistant Principal • Ann Donlon, Assistant Principal • Kelly McPherson, Assistant Principal**

A student requesting to bring a guest to a River Ridge High School social event, who is not also a River Ridge High School student **MUST** have this form completed and approved by the principal before purchasing tickets. This form requires the signature of the Principal or Administrator of the guest's school. The dance policy allows a River Ridge High School student to bring **ONE** guest, who must be a high school-aged student. RRHS students requesting to bring an older student must have special permission from a River Ridge High School administrator and must not exceed the age of 20. If approved to attend, the guest must bring a current school ID or other photo ID to the social event.

**This form must be turned in to student services no later than the end of school day March 15, 2024!**

**THERE WILL BE NO EXCEPTIONS!**

As a River Ridge High School student, I understand all River Ridge High School's policies apply to all school social functions. All guests must abide by the expectations of River Ridge High School students. I will take responsibility to inform my guest of these policies and ensure full compliance with said policies. I further understand that my guest must have a current school or photo identification card in their possession and present it at the door upon entering the event.

\_\_\_\_\_/\_\_\_\_\_  
RRHS Student's Full Name [Print] & [Signature]

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Student ID#                      Grade                      Date

\_\_\_\_\_  
Parent of River Ridge High School Student [Print]

\_\_\_\_\_  
Signature of Parent

[\_\_\_\_\_] \_\_\_\_\_  
Telephone number

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

### GUEST INFORMATION:

Name: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_

Signature of Guest: \_\_\_\_\_ [\_\_\_\_\_] \_\_\_\_\_  
Home/Cell #

\_\_\_\_\_/\_\_\_\_\_  
Parent of Guest Full Name [Print] & [Signature]                      [\_\_\_\_\_] \_\_\_\_\_  
Home/Cell#

### GUEST SCHOOL'S CONSENT:

As the Principal and/or Administrator of \_\_\_\_\_, I verify that \_\_\_\_\_  
Guest's High School                      Guest's Name

is in good standing (2.0 cumulative GPA and no level 3 referrals).

\_\_\_\_\_  
Administrator's Signature                      \_\_\_\_/\_\_\_\_/\_\_\_\_  
Date