Jackson Center High School 204 S. Linden Street, Jackson Center, OH 45334

OUTSIDE GUEST DANCE ATTENDANCE REQUEST

Jackson Center High School

(PLEASE PRINT)			
, reque (J.C. Student Name)	st permission to	bring my dat	te/guest(Guest's Name)
			nt at
Guest's Phone #	1. My dato/gat	ot lo a otagoi	
nigh school/attends	college/is	enlisted in th	ne branch of the military
agree to the following requirements:			
My date/guest will have a principal from 937-596-6490, No later than Wednes			rm and fax it to Jackson Center High School.
I will introduce my date/guest to an a present a photo ID.	dministrator be	fore entering	the dance. At this time, my date will also
3. I will comply with all school rules and	see to it that m	y date/guest	does the same.
4. I will assume full responsibility for the	e behavior of m	y date/guest.	
5. I will leave the dance if my date/gues	t is asked to lea	ave.	
I understand that my date/guest cannot of 21.	not be a middle	school stude	nt and that my date/guest must be under the a
7. A copy of a photo ID must accompar	y this complete	ed form for an	y date/guest that is not a high school student.
	he above guide f and administra	lines will resu ation to take a stated.	us entry to the dance if circumstances warran ult in my being denied this privilege in the futur any actions necessary to maintain orderly Date
Jackson Center Student Signature	Grade	Age	Date
Jackson Center Parent's Signature	Dat	e	Student's home phone #
Date/Guest Signature	Grade	Age	Date
For High School Students Only			
To be completed and faxed by a school admi	nistrator by We	dnesday, Apr	il 24, 2024, to 937-596-6490.
Administrator's Signature	Administrator's Name Printed & Contact Information		