

Gallatin High School

700 Dan P Herron Drive
Gallatin, TN 37066
(615) 452 - 2621

Principal: Dr. Ron Becker

Prom Sponsors: Heather Adkins & Ann Sexton

Prom Guest Permission Form for Non-GHS Students

I, _____, a student at GHS am respectfully requesting permission to bring _____ (*name of guest*) to Prom on Saturday, May 6, 2023. I understand that my guest is my responsibility and if any problems occur, I can and may be held responsible.

Please check the appropriate option below and complete the required information. **Guest tickets CANNOT be purchased until this form is submitted with appropriate documentation and approved.** The guest will not be permitted to attend until this form has been completed and approved. **This form MUST be returned to Dr. Becker by Monday, May 1, 2023.**

☐ **Option 1:** My guest is a high school student. (*Age limit - must be at least a Freshman*)

My guest named above is currently a student at _____. He/she is a student who is considered to be of reputable character as shown by the signature of the Principal or Assistant Principal of his/her school. I have attached a **photocopy of his/her Photo ID.**

(Signature of guest's School Administrator/Title)

(School Office Phone Number)

☐ **Option 2:** My guest is **NOT** a high school student. (*Age limit - 20 years old and younger*)

My guest named above is not a high school student. He/she is _____ years old and is employed by _____ (*list employer*) or attends _____ (*list college or technical school*). I have attached a **photocopy of his/her driver's license or State ID card or passport** to this request.

This section to be completed by GUEST

As a guest of GHS, I will obey the rules for GHS students as stated in the Student Handbook. I understand that this is a school sponsored event and is **SMOKE, VAPE, DRUG, and ALCOHOL FREE**. I also understand that I shall be referred to an on-site officer and/or school administrator for behavior that is violent, does not meet the student regulations described in the Student Handbook, or if it appears I am under the influence of drugs and alcohol.

(Signature of Guest)

(Phone Number where guest can be reached)

____ Approved ____ Denied _____ Dr. Ron Becker, Principal GHS