

Legacy High School
Dance Guest Pass



Rules:

- Please fill out all of the requested information below.
- One guest per Legacy student.
- Guest must be accompanied by below named Legacy student.
- Legacy students are responsible for the behavior of their guests.
- **All guests must show photo ID at the door.**
- All CCSD rules apply while at the activity.
- Guest must be of high school age and/or not exceed 20 years old.
- All guest must be preapproved to attend the activity.
- **This completed activity pass must be presented to the athletics office by noon the Friday before the event (Fax: 799-4524)**

Name of the Activity: _____ Date of the Dance: _____

Legacy Student Name: _____ ID # _____

Legacy High School Parent: By signing this dance guest pass you are acknowledging that your child will be escorted to the Legacy dance with a guest from another school.

Legacy Parent Signature: _____ Date: _____

Guest: The guest must present photo identification at the door.

Guest Name: _____ ID # _____

Guest's Home School: _____

Have you ever attended Legacy High School? Yes No If yes, dates: _____

FOR CCSD HIGH SCHOOL STUDENTS:

Guest Home School Administration: The guest must obtain administrative approval from their home school. The guest's home school administrator should not sign this pass if the student has violated CCSD or school rules, is on suspension or RPC, or if the administrator has any reservations about the student's behavior at the event.

Guest's Home School Administrator: _____ Title: _____

Guest's Home School Administrative Recommendation Signature: _____

FOR NON CCSD-HIGH SCHOOL STUDENTS:

Guest University or Employer The guest must obtain approval from their university or employer. The guest's university or employer should only sign this pass if in good faith believe the attendees behavior will be accordenace with CCSD and Legacy High School rules and expectations. Do not sign this pass if you have any reservations about the guest's behavior at the event.

Guest's Univsersity or Employer: _____ Title: _____

Contact Name: _____

University or Employer Phone #: _____ Email: _____

Guest's University or Employer Signature: _____

Legacy Administration and Activities Coordinator: _____ Approved _____ Denied

Authorized by: _____ Title: _____

Ticket #: _____ Photo identification (initial when shown at door): _____