



# Land O' Lakes High School

20325 Gator Lane, Land O' Lakes, FL 34638 • (813) 794-9400 • Fax: (813) 794-9491



## 2022 HOMECOMING DANCE GUEST REQUEST FORM

This year's dance policy allows for a student in good standing from another Pasco County high school, **if tickets are available** and with special permission from a LOLHS administrator, to attend the homecoming dance. Our student must have this form completed and returned at the time of purchasing an additional ticket. **This form requires the signature of the sponsoring student's parent/guardian.** All items must be fill out in the "Guest Information" section below. In addition, a guest must provide a clear copy of a current school ID or photo identification card (i.e. driver's license) with this request form. When completed, submit this form to the Student Services Office. Administration will determine if it is approved.

**Completed forms are due by Friday, Oct. 28. Turn in the approved request with payment at the ticket sales table. No late forms are accepted, nor will we sell tickets on Saturday.**

As a Land O' Lakes High School student, I understand that all policies apply at school social functions. All guests are required to abide by the *Pasco Schools Code of Student Conduct*. I will take responsibility to inform my guest and ensure full compliance of these policies and the dress code for the dance. My guest will have a current school/photo identification card in his/her possession during the dance.

Printed Name of LOLHS Student \_\_\_\_\_

Signature of LOLHS Student \_\_\_\_\_

Student ID # \_\_\_\_\_

As the parent/guardian of the above-named Land O' Lakes High School student, I find his/her guest to be a responsible person and I approve him/her as an acceptable guest for this event.

Printed name of parent/guardian \_\_\_\_\_

Signature of parent/guardian \_\_\_\_\_

Your Phone # during dance \_\_\_\_\_

### Guest Information

\*Guest Name: \_\_\_\_\_ \*Age/Date of Birth: \_\_\_\_/\_\_\_\_

\*Address: \_\_\_\_\_ \*City/State: \_\_\_\_\_ \*Phone #: \_\_\_\_\_

\*Medical information about guest: \_\_\_\_\_ Pasco Schools ID # \_\_\_\_\_

Parent/Guardian Name of Guest: \_\_\_\_\_

Phone number to call Parent/Guardian during dance: \_\_\_\_\_

**\*\*All prospective guests must attach a clear copy of a photo ID to this form\*\***

Approved \_\_\_\_\_ Denied \_\_\_\_\_

Land O' Lakes High School Administrator Final Approval: \_\_\_\_\_

**THE ADMINISTRATIVE DECISION REGARDING GUEST APPROVAL IS FINAL AND MAY NOT BE APPEALED.**

**THIS FORM IS AN OPTION ONLY IF TICKETS ARE STILL AVAILABLE. TICKET SALES TO LOLHS STUDENTS ARE OUR PRIORITY. WE DO NOT GUARANTEE PROCESSING OR SPACE FOR GUESTS.**