



# Land O' Lakes High School

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## 2024 HOMECOMING DANCE GUEST REQUEST FORM

This year's dance plans now allow for a LOLHS senior to bring a student in good standing from another Pasco County high school, **if tickets are still available**, to our homecoming dance. The LOLHS 12<sup>th</sup> grade student must have this form completed and returned at the time of purchasing an additional ticket. **The form requires the signature of the sponsoring student's parent/guardian.** All items must be filled 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.**

**Turn in the approved request form with payment at the ticket sales table on Tuesday or Thursday. 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 # \_\_\_\_\_

Pasco County School: \_\_\_\_\_ 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 FOR 12<sup>TH</sup> GRADERS ONLY IF TICKETS ARE STILL AVAILABLE.  
WE DO NOT GUARANTEE PROCESSING OR SPACE FOR GUESTS.**