Celebration High Prom Guest Form: Prom 4/8/2023 @ EPCOT from 8pm-12am

High School students who wish to attend one of our dances, must complete this form and meet the requirements listed below.

1. Follow all CHS and Osceola County Public Schools rules, policies and procedures.
2. Be at least 14 years old in high school and/or no older than 20 years of age
3. Have no criminal record.
4. Not presently be suspended or expelled from any school.
5. Have no serious behavior problems at their present school or when they were in school.
6. Be recommended by an administrator from their high school or their immediate supervisor at place of employment if not currently in school.



**Prom Dress Code**

* Slits on dresses must not be above the top of the knee
* Dresses must be mid-thigh
* No cutouts on dresses, no mid-riff showing, no dresses that expose sides
* No flip-flops
* Spaghetti straps and strapless dresses are acceptable
* Dresses with back open to waist or lower are not permitted
* No see through dresses or suits
* Dress shirts, tie, dress pants and belts are required (sport coat, suits, or tuxedos are optional)
* Tennis shoes and flip flops are not permitted
* Jeans and/or golf shirts are not permitted
* No bandanas, hats, headbands, etc.,  of any type are allowed

This form must be **FULLY COMPLETED, APPROPRIATELY SIGNED** and turned in to Student Services by March 25th . No guest tickets will be issued until this completed form has been submitted and approved and signed of by Ms. Hyslop in room 7113

 To be completed by guest (please print) Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Guest of CHS Student\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Driver’s License/State ID Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \*\*A CLEAR PHOTOCOPY OF THE GUEST’S PICTURE ID MUST BE ATTACHED TO THIS APPLICATION\*\* To be completed by an administrator at the guest’s school, college advisor, or direct supervisor at place of employment. (By signing this form, you give CHS permission to contact you about this potential guest) Name of School/Place of Employment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School/Work Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is the above-mentioned student/employee currently in good standing (2.0 GPA, no discipline issues)? **YES NO**

Do you recommend that he/she be admitted to a Celebration High School function? **YES NO**

Guest’s School Administrator/Supervisor Signature & Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Please print name here) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Approved by Mr. Armour’s Signature

 \*\* A PHOTO ID OR SCHOOL ID MUST BE PRESENTED AT THE DOOR THE NIGHT OF THE EVENT