

# LACONIA HIGH SCHOOL

301 W. Division Street  
Rosendale, WI 54974  
(920) 872-2161 fax (920) 872-5482

## Guest Permission Form

**Event:** Laconia High School Prom  
**Event Date:** Saturday, May 4, 2024

### Instructions:

1. LHS student completes the top portion of this form.
2. LHS student gives form to guest to have his/her principal or designee complete the bottom portion and **fax** it to the Laconia High School Office at **920-872-5482**.
3. **This form must be completed and returned by 3:45 pm, Monday, April 29, 2024.**

**Laconia Student:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**Guest Name:** \_\_\_\_\_ **Guest Date of Birth:** \_\_\_\_\_  
(including middle name)

**Guest School:** (if current high school student) \_\_\_\_\_

**Guest Address:** (if a non-high school student) \_\_\_\_\_

**Guest Emergency Contact** (name & phone #) \_\_\_\_\_

I have read the student handbook policy regarding guests and activities and understand that this form must be returned **Monday, April 29, 2024 at 3:45 pm** in order for permission to be obtained. I also understand that my guest is expected to comply with the rules of Laconia High School while attending this activity.

**All guests must arrive & leave with the LHS student & present a photo ID.**

**LHS Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**LHS Student's Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Guest Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Guest's Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

(required if guest is under 18)

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### GUEST DISTRICT VERIFICATION

I verify that \_\_\_\_\_ is in good standing as a student at our high school and would be permitted to attend co-curricular events in our district.  
(guest name)

**Guest's Principal/Designee's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**LHS Principal Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

\*\*\*Permission has been granted for this student's guest to attend this event at Laconia High School.