

Cassopolis High School 22721 Diamond Cove Street Cassopolis, MI 49031 (269) 445-0541 Fax (269) 445-3112 Lindsay Gorham-Pflug, Principal

Guest Request Form



## Directions:

A student requisition to bring a guest, who is not a Cassopolis Schools student, must have this form completed and returned to the office at least 2 WEEKS prior to the event. *The guest must be in school and/or no older than 20 years of age.* A copy of the form indicating the status of the requisition will be returned to the student prior to all events. Please wait for approval before purchasing tickets, etc. This form requires the signature of the principal or an administrator of the guest's school. Student guests are not eligible to attend Cassopolis Schools events if **any** of the following ineligibility indicators apply:

A reference is required if the guest is not a high school student (reference can NOT be a parent/relative).

- Withdrawn or expelled from any school, including drop outs
- Currently suspended or excluded from school on event day
- Physical Condition/appearance unacceptable
- Otherwise not good standing with their school

All Cassopolis Schools students and their guests must bring photo ID to the event. A copy of the guest's photo ID must accompany this form.

Cassopolis Schools Student Information:

As a Cassopolis Schools student, I understand that all rules apply at school events, and I will take the responsibility to inform my guest of these rules as s/he is my responsibility. I also agree to stay with my guest(s) and provide photo ID at the event.

As the parent/guardian of the above Cassopolis Schools student, my signature acknowledges that I am aware of my child's request to bring a guest to a school function. Furthermore, I have read this form in its entirety and understand that my child is responsible for their own behavior as well as for the behavior of the guest.

Signature of Cassopolis Student Signature of Parent/Guardian of Cassopolis student Phone Number GUEST INFORMATION: (ALL FIELDS ARE REQUIRED) Name of guest: Grade: School phone Number:\_\_\_\_ Guest's School: As a guest, I understand that all rules apply at school vents. I will abide by all rules and behave in a respectful manner. I agree to stay with my host and provide photo ID at the event. As the parent/guardian of the guest, I understand that my child is require to comply with all Cassopolis Public Schools rules and understand that s/he will be dismissed from the event for non-compliance. Signature of Parent/Guardian of Guest Emergency Phone # Guest Signature As the principal/administrator of the school this student attends, I verify that s/he is a student in good standing at this school. I recommend that s/he be allowed to attend the Cassopolis Schools function noted on this form. Guest's School Administrator Phone Number Date

Cassopolis Request Determination:

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