



**Homecoming Dance ~ Outside Date Form**  
**Saturday, October 21st, 7:00 – 10:00 p.m., The Pavilion on Oak Mountain**

113 Central Road  
Carrollton, GA 30116  
700.834.3386  
<http://chs.carrollcountyschools.com>

Principal Kelly Edwards  
Asst. Principal Zac Cooper  
Asst. Principal Shayna Moses  
Asst. Principal Chuck Robinson

**Non-Central High School Student Permission Form**

All forms must be submitted no later than **Friday, October 6th**. FORMS WILL NOT BE ACCEPTED AFTER THIS DEADLINE. Make sure you submit this form before purchasing your ticket. **IF THE FORM FOR AN OUTSIDE GUEST IS NOT TURNED IN, YOUR GUEST DATE WILL NOT BE ATTENDING THE DANCE.** Submit the completed form to room 718, 634, or 604.

CHS Student Name & Grade: \_\_\_\_\_

Guest's Name: \_\_\_\_\_

**Guest is currently:** (complete all that apply)

Attending \_\_\_\_\_ High School. College: \_\_\_\_\_

Employer: \_\_\_\_\_

**Guest Code of Conduct:**

I, \_\_\_\_\_ (parent/guardian), give \_\_\_\_\_ (guest name) permission to attend the Central High School Homecoming Dance. I understand that appropriate behavior is expected. Guests not conducting themselves in an appropriate manner will be instructed to leave the event and the event property.

\_\_\_\_\_  
Student Guest Signature

\_\_\_\_\_  
Student Guest Parent/Guardian Signature

\_\_\_\_\_  
CHS Student Signature

\_\_\_\_\_  
CHS Parent/Guardian Signature

**Required Telephone Numbers:** CHS Student's Parent/Guardian cell: \_\_\_\_\_

Guest Student's Parent/Guardian cell: \_\_\_\_\_

**To Be Completed By Student Guest High School Principal:**

*I attest and affirm that the above-mentioned student is in good standing at our high school.*

\_\_\_\_\_  
Principal's Signature

**Required Guest Information (No one 21 years of age or older will be admitted to the event).**

Date of birth: \_\_\_\_\_ Driver's License Number: \_\_\_\_\_

High School graduation year: \_\_\_\_\_ Cell phone: \_\_\_\_\_

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