MORTON
High School

DEIDRE RIPKA
Principal

JAMIE ADOLPHSON
Associate Principal

SCOTT JONES
Assistant Principal
Athletic Director

JOSH PRICHARD
Assistant Principal

TODD HERRMANN
Assistant Principal

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A student requesting to bring a date, who is not a Morton High School student, must have this form completed and returned **3 days prior** to the date of the dance. <u>Please notice that this form requires the signature of the principal or administrator of the guest's school and a copy of the student's ID.</u> The guest must be at least a ninth grade student and/or under the age of 21. If the guest is not currently attending high school, a telephone interview with a MHS administrator must take place prior to the date of the dance. **It is the responsibility of the guest to initiate the phone call to the administrator.** (Phone number is 284-6120)

As a MHS student, I understand that all MHS rules apply at any school function. I am also aware that once my date and I leave the dance, we will not be allowed re-entry for any reason. I understand that neither my guest nor I may be under the influence of drugs or alcohol during this activity. The use of, or possession of, tobacco products is not allowed at any school activity and is an ordinance violation for students under the age of 21 in the village of Morton. I will take full responsibility to inform and ensure my date's compliance to all school rules while attending the dance. The guest must always have photo identification in his/her possession.

_____   _____

Name of Dance   Date of Dance

_____   _____

Name of MHS Student   Grade

_____

Signature of MHS Student

As the parent of the above MHS student, I find his/her date to be a responsible person, and I approve of him/her as an acceptable guest for this MHS social event.

_____   _____   _____

Parent/Guardian Signature of MHS Student   Date   Phone #

GUEST INFORMATION (PLEASE PRINT)

NAME: _____   PHONE # _____ DATE OF BIRTH: _____

ADDRESS: _____ SCHOOL: _____

As the Principal/Administrator of the visitor's school, I verify he/she is a student in **good** standing.

_____   _____   _____

Name of Administrator   Title   Phone #

_____   _____

Signature of Administrator   Date