



Wendell Krinn Technical High School
Prom 2019
Guest Request & Agreement



This completed form must be turned in to the front office **no later than 3pm on Wednesday, April 3rd**.

To be considered, the application must have a clear copy of a valid driver's license or photo ID with date of birth attached to this form. All guest applications are subject to approval by school administration. Providing false information will result in the request being denied. No middle school students or anyone over the age of 20 will be considered.

Guest Name: _____ Date of Birth: _____

Age: _____ Grade: _____

Address: _____ City: _____ Zip: _____

High School Attending (if applicable): _____ Graduate? YES NO

Any discipline referrals received during this school year for guest? YES NO

If 'YES', please state the situation and status of charges _____

As a guest of a Wendell Krinn student, I understand the following:

All guests must comply with the Pasco County School Board Student Code of Conduct requirements.

Clothing should be in accordance to the Pasco County School Board Student Dress Code requirements.

Students must be in good standing at their base school (if applicable).

Guests must present a driver's license or school ID for admission.

This dance is a tobacco free event. The use and/or possession of tobacco products is NOT permitted.

Sexually suggestive dancing is not appropriate and will not be tolerated. This includes grinding, grind trains, bending over, straddling legs, lap dancing, etc.

Inappropriate touching is prohibited. Students who break this rule will be asked to sit out for 15 minutes. If the behavior continues, the student(s) will be asked to leave. The lights will be turned up and/or music changed as a collective warning for everyone.

WKTHS reserves the right per the Student Code of Conduct and statute, upon reasonable suspicion, to search all cars, party buses, and limos as well as purses and other belongings.

Guest signature: _____ Date: _____

Guest Parent/Guardian Signature: _____

Guest Parent/Guardian Name (print): _____ Phone #: _____

 WKTHS Student Name (print): _____ Student ID#: _____

WKTHS Student Signature: _____

Parent/Guardian Name (print): _____ Phone #: _____

Parent/Guardian Signature: _____

-----WKTHS USE ONLY-----

Approved Not Approved Administrator Signature _____ Date: _____