Washington-Liberty High School

1301 N. Stafford St. Arlington, VA 22201

**DANCE GUEST PERMISSION FORM**

**Washington-Liberty Host Student Information:**

Name/Grade \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Guest Information:**

Name/Grade \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DOB: \_\_\_\_\_\_\_\_\_Age \_\_\_\_Guests must be a current APS HS or program school.

Guest Parent Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent Permission: □ YES □ NO

Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact During Homecoming-Name and phone number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

High School guest attends: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

All individuals wanting to attend the W-L event listed above who are not W-L students must see that this form is completed and returned to the appropriate Principal by the deadline date.

**Expectations:**

* Guests must conform to all expectations in the W-L Students Handbook.
* Guests may NOT be middle school student.
* Guests must enter with the W-L student who purchased their ticket.
* Guests must present a photo ID to enter the event.
* This application must be completed and approved before tickets will be sold.
* **Guests must verify vaccination status or obtain clearance ticket from ResourcePath Friday afternoon after testing negative for Covid. ResourcePath can administer a rapid Covid test at Washington-Liberty HS between 3:30-6:30pm. Guests must fill out the ResourcePath consent form prior to taking a Covid test. If the guest does not have a clearance ticket from ResoucePath they will not be allowed to enter the dance.**

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**TO: Administrator of the Guest’s High School**

**FROM:** Mr. Tony Hall, Principal

RE: Guest’s Attendance at W-L Event \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The individual listed as a guest wants to attend the above event. I am requesting that you sign this form affirming that this individual is in good standing and exhibits good citizenship at your location. Please sign if appropriate – Include your contact phone number for verification purposes. Thanks for your cooperation.

Administrator’s Name Administrator’s Signature Contact Phone Number