



Portage Area JR/SR High School



85 Mountain Avenue, Portage, PA 15946

Phone: 814-736-9636

Fax: 814-736-9597

Request for Guest to Attend Portage Area JR/SR High School Event

I, _____ *Guest Name Here* _____ am requesting permission to attend Portage Area Jr./Sr. High School's _____ *Name of Event Here* _____ event with Portage Area student, _____ *PASD Student's Here* _____.

** A person over the age of twenty (20) is not permitted to attend the above school function. (Photo ID is required for all guests not currently enrolled in a secondary school. Grade restrictions apply for some events.)

Guest's Parent(s)/Guardian(s) Name: _____ *List Parent/Guardian Name Here* _____

Emergency contact's phone number for guest:

#1: _____ *(XXX) XXX-XXXX* _____ #2: _____ *(XXX) XXX-XXXX* _____

As a guest, I agree to obey all rules and regulations as stated in the Portage Area Jr./Sr. High School Student Handbook. I understand noncompliance will result in my removal from the event.

Signature of Guest: _____ *Guest Signs Here* _____ Date: _____

Signature of PAJR/SRHS Student: _____ *PASD Student Signs Here* _____ Date: _____

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Signature of Guest's School Principal/Guidance Counselor (if applicable)

The student named above is in grade _____ *Grade* _____, and in good standing at

_____ *School Name Here* _____ School. He/She has no serious disciplinary

infractions or obligations that would prevent him/her from attending our own events.

_____ *School Admin/ Counselor Signs Here* _____
Signature of Principal/Guidance Counselor _____ Date _____

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What school did the guest graduate from or last attend? _____ *School Last Attended Here* _____
Attach Photo ID (Required to verify name and age)

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Forms are due one week before the event date. Please fax (814)-736-9597 or return the form to Portage Area JR/SR High School office for review and approval.