



**Rockwall High School  
Guest Dance Form**



Any student requesting to bring a date who is not a student at Rockwall High School must have this form completed and returned to their assistant principal prior to ticket purchase date. This form requires the signature of the principal of the guest's school and the RHS student's parent/guardian signature. **The guest must provide a driver's license or a photo ID at the dance entrance. The guest cannot be older than 20 years old.**

RHS Student Name \_\_\_\_\_ Grade Level \_\_\_\_\_  
 Guest's Name \_\_\_\_\_ Age/Grade Level \_\_\_\_\_  
 Guest's Parent Name \_\_\_\_\_ Phone Number \_\_\_\_\_  
 Guest's School Name \_\_\_\_\_

**To be completed by an administrator at guest's high school:**

Name of School \_\_\_\_\_ School Phone: \_\_\_\_\_  
 Is the above-mentioned student currently in good standing? Yes No  
 Do you recommend that he/she be admitted to a RHS function? Yes No  
 \_\_\_\_\_  
 Signature of Administrator Title

*As a guest of an RHS student, I understand that all school rules apply during this event:*

- ❖ *I will not be under the influence of drugs or alcohol.*
- ❖ *I will not use or possess tobacco products.*
- ❖ *I will not engage in lewd or provocative dancing.*
- ❖ *I realize that once I leave the dance no reentry is allowed.*
- ❖ *I will abide by all school rules and act responsibly.*

*I agree to obey all rules set by Rockwall High School as a guest during the school event. I understand that students who do not abide by the rules may be asked to leave the dance without warning and will receive consequences according to current school regulations.*

\_\_\_\_\_  
 Guest Signature Date

*I understand that all school rules apply at school functions. I will take the responsibility of reviewing the rules with my guest.*

\_\_\_\_\_  
 RHS Student Signature Date

*As a parent of the above-mentioned RHS student, I find his/her date to be a responsible person and I approve him/her as an acceptable guest for this RHS school event. I understand that I will be contacted if any school rules are violated by my child or my child's guest.*

\_\_\_\_\_  
 RHS Parent Signature Date Phone Number \_\_\_\_\_

**OFFICE USE ONLY:**  
 RHS Grade Level Administrator's Signature of Approval: \_\_\_\_\_ Date: \_\_\_\_\_  
**THIS FORM DOES NOT GUARANTEE A GUEST TICKET. LIMITED NUMBERS SOLD: FIRST COME, FIRST SERVED.  
 BASIS ON DESIGNATED DATES. FORM MUST BE COMPLETED IN ITS ENTIRETY.**