SVHS Student Name: ID#	Grade:
------------------------	--------

## Non-SVHS Guest Permission Form (For NON-SVHS Guests Only – <u>Must be under 21</u>

## To Be Completed by Guest (Please print clearly).

Guest Name:	Age:	Date of Birth:	
Guest Driver's License:	Cell Phone:		
Street Address:			·
City:		State:	
Parent Name:	· · · · · · · · · · · · · · · · · · ·		
Street Address:			
City:			
Home Phone Number	Cell Phone Number	er	
Emergency Contact Name/Phone:			
To Be Completed by an Administrator at Guest's High School (Please print clearly)			
Name of School	School Pho	ne Number:	
Is the above mentioned student in good standing?	Yes	No	
Do you recommend that he/she be permitted to attend the Smithson Valley High School Event?	Yes	No	
School Administrator Printed Name:		Title:	
School Administrator Signature:			