

Guest Contract for WDHS Prom at Liuna Station on Fri., May 13, 2022. This form must be completed & returned at time of purchase. Tickets sold April 19-25, 2022

PART	A: Guest to complete	e: Guest is a WDHS student	□ Guest is	a WDHS student	
	Print name of scho	ol guest attends:			
1.	Print name of Waterdown student sponsoring you:				
2.	Print your Name:				
	Print your Address:				
	Best Contact Numbe	۶ ۲ :	(pare	ent/guardian/caregiver if <18 years old)	
3.	Photo Identification: Photo ID # (this ID must be presented at event):				
		Type of Photo ID:			
4.	Dietary Concerns: _				
• I furthe If g • •	Not to have consumed alcohol. We will refuse and/or alcohol use is and/or drugs are susp Make myself known to Have parent/guardian p er agree that if I am for uest is <18 years old I give permission for W I give permission for W I am aware that there r	DHS principal to contact the principa DHS principal to contact my parent of may be further consequences, includ haviour may result in consequences	nfluence of o n if she/he ap you arrive in ed entry and trance to the nt es, or the HV al of my schoo or guardian to ing but not lin	r in possession of drugs or pears to be impaired (drugs a vehicle where alcohol police will be contacted. school event. VDSB's Safe Schools Policy: ol. o discuss the violation. nited to, police involvement.	
	If an emergency or urg called.	ency occurs, your emergency contac	ct will be	Please complete the Media Consent form on the reverse side.	
Guest	signature:	nature: Date:			
provid		by the guest's parent/guardian or a act above (ideally a parent or guar			

I have read all of the conditions and rules and I give permission for my son/daughter to attend this Waterdown District High School event. I understand that if my son/daughter is in violation of the rules of the event, this may result in additional school consequences at his/her school. I WILL pick him/her up from the event in case of an emergency or urgency.

Please <u>print</u> your name and contact information below to indicate that you have read and understand that you will be responsible for your child and/or guest (>18 years old) in the event of and emergency and or urgency.

Name of Parent/Guardian/Caregiver/Emergency Contact:			
Best Phone #:	Cell #:		

Parent/Guardian/Caregiver Signature (if <18 years old): _____