



3535 Truman Ave., Mountain View, CA
650.940.4622

GUEST PERMISSION to Attend Mountain View High School Event

Mountain View Student Information

MVHS Student Name _____ Student ID# _____

Parent/Guardian Phone (Home) _____ (work, cell) _____

I understand that I may bring **one** approved guest to _____.

Dance/Event _____

I am aware that my guest must **arrive and leave the event with me**. I understand that I am responsible and accountable for my guest's dress, conduct and behavior. **It must be in keeping with all MVHS guidelines**. I also understand that this permission is revocable at any time should a school official deem it necessary

THIS SLIP MUST BE SIGNED BEFORE A TICKET MAY BE PURCHASED (tickets are non-refundable, non-transferable). BOTH STUDENT AND GUEST MUST BRING PHOTO ID AND RECEIPT WITH THEIR NAME TO THE EVENT.

MVHS Student's Signature Date

My student has permission to bring the person named below as a guest to the MVHS event listed on this application.

Parent/ Guardian Name Parent/Guardian Signature

The following information is to be completed and signed by the guest's high school officials.

**Guest Information:
(Guest must be NO MORE than 20 yrs old)**

Guest Name _____ Date of Birth _____

Guest Attends _____ ID #: _____
School/College

Guest's Parent/Guardian's Home Telephone _____

Guest's Emergency Contact

Name _____ Telephone _____

I verify that the above named person is currently a student in good-standing. (Please attach business card to this permission slip) Thank you.

Name Title: Principal or Assistant Principal

Signature Date