OUT-OF-SCHOOL GUESTS FOR DANCES AT C-FC

We are glad that you have chosen to attend our dance here at Cochrane-Fountain City High School. To ensure the safety of our students and guests, we ask that you complete the following registration form and return it to the office at least **three** days prior to the dance.

C-FC Student wishing to bring Guest:

Student Guest Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age:

Current School of Attendance:

Year of Graduation:

Principal’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone:

Principal’s Signature (indicates student is in good standing)

Guest’s Parent’s Names:

Parent’s Phone Number:

Student’s Guest Signature:

Guest Parent Signature:

C-FC Principal: