



ANKENY HIGH SCHOOL

1155 SW CHERRY STREET

ANKENY, IA 50021

515-965-9630

FAX 515-964-2975

DANCE GUEST REQUEST FORM

Ankeny High School requires that students bringing guests to school-sponsored dances complete and return this information form. The information requested on this form is required in order to better assure safety and security at school dances. A completed form must be returned to the Ankeny High School office **by noon on the day before** the dance.

Please be advised of the following rules and requirements:

1. No guest will be admitted the night of the dance without this form being on file.
2. Dance Guest permission form must be on file by noon the day before the dance
3. All guests must sign in and provide proof of identity (ID) prior to being admitted into the dance
4. Students and guests must follow the Ankeny High School Code of Conduct.
5. An Ankeny student may sign in one guest only. Do not bring dates for other students.
6. Problems with guests will result in the guest and the Ankeny High student being removed from the dance and parents notified.
7. No students in grades 9 or below, nor any guest above 20 years of age, will be allowed to attend an Ankeny High school dance.
8. Any guest who is not an alumnus or current high school student must have a driver's license to be scanned through Ankeny's verification system.

As an Ankeny High School student, I understand that all AHS rules apply at school social functions. I will take full responsibility to inform and ensure my date's compliance to these rules.

ANKENY STUDENT'S NAME: _____ GRADE: _____ DATE: _____

Print name

ANKENY PARENT'S SIGNATURE: _____

(Signature indicates that you understand and agree with the rules listed above)

GUEST INFORMATION

Guest's Name _____

Guest Home Phone Number _____ Guest's Cell Phone Number _____

Signature of Guest's Parent/Guardian _____

Guest's Home School _____

As the Principal/Administrator of the school this guest attends, I verify that he/she is a student in good standing.

Signature of Guest's Principal/Administrator(title)

School Phone

Date

*If a former AHS Student, please write the name of past counselor in the GUEST INFORMATION area above.