



ANKENY CENTENNIAL HIGH SCHOOL

2220 NW State Street Ankeny, IA 50023 515-965-9610 Fax: 515-964-5070

2023 HOMECOMING DANCE GUEST REQUEST FORM

Ankeny Centennial High School requires that students bringing guests to school-sponsored dances complete and return the 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 ACHS office by 4:00 pm on Wednesday, September 20, 2023.

Please be advised of the following rules and requirements:

- No guest will be admitted the night of the dance without this form being on file
- All guests must sign in and provide proof of identity (ID) **prior** to being admitted into the dance. Students and guests must follow the Ankeny Centennial High School Code of Conduct.
- A Centennial student may sign in one guest only and may not bring dates for other students. Problems with guests will result in the guest and the ACHS student being removed from the dance and parents notified.
- No student in grades 9 or below, nor any guest above 20 years of age, will be allowed to attend an ACHS Dance.
- Any guest who is not a current high school student, must have a driver's license to be scanned through Ankeny's verification system. This must be done by Wednesday prior to the dance.

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

ACHS Student's Name (please print name): _____ Grade _____

ACHS Parent's Signature: _____ Date: _____
(Signature indicates that you understand and agree with the rules listed above.)

Guest Information:

Guest Name (please print): _____ Guest Cell Phone Number _____

Guest Home Phone Number: _____ Guest High School: _____

Signature of Parent/Guardian: _____

If the guest is no longer in high school, please give his/her date of birth and drivers' license number.

Date of Birth: _____ Drivers' License Number: _____

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

Signature of Guest's Principal/Administrator _____ Date: _____

School Phone Number: _____

Upon completion this form may be faxed to 515-964-5070 or emailed to chs.office@ankenyschools.org.