



# St. John Neumann Regional Academy Jr./Sr. High School

## SCHOOL EVENT – GUEST FORM

<b>To be completed by SJNRA Family</b>	
<i>As the parent/guardian, we/I request that he/she be allowed to invite said guest to an SJNRA event. We/I assume full responsibility for the guest to attend this function.</i>	
SJNRA Student's Name:	Today's Date:
Grade/Homeroom Teacher:	Parent/Guardian's Name:
Parent/Guardian Phone:	Parent/Guardian Signature:
Name of Event	Date of Event:
<b>To be completed by Guest Student Family</b>	
<p><b>*All guests of SJNRA student's must present a photo ID at the event.*</b>  <b>*No guest over the age of 20 will be approved.*</b></p> <p>I will abide by all rules, procedures, and directions of any adult in a supervisory position while at the event held at St. John Neumann Regional Academy. I understand that failure to do so will result in my being dismissed from the event and/or sanctions being imposed on me by local law enforcement.</p>	
Guest Student's Name:	Guest's Birthdate & Age:
Parent/Guardian's Name:	Parent/Guardian Signature:
Parent/Guardian Phone:	Name of School:
<b>To be completed by Guest's School Administrator</b>	
<i>The above name student is in good standing at his/her school and I recommend that he/she should have permission to attend the SJNRA event.</i>	
Name of School Administrator:	Position of School Administrator:
Signature of School Administrator:	Today's Date: