**North Gem High School Dance Guest Agreement Form**

**North Gem** Student Name (Please Print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This Guest Agreement Form is for the following NGHS Dance: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (e.g. Homecoming Dance, Jr. Prom, etc.)

Date of Dance: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*The North Gem student listed above will provide a copy of this form for your guest to complete. This form needs to be returned to the North Gem office no later than the Monday prior to the scheduled activity.*

**GUEST INFORMATION**

**GUEST NAME (Please Print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**HIGH SCHOOL YOU ARE CURRENTLY ATTENDING:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** *Note: Guests attending a North Gem event must be of high school age and currently attending high school.*

GUEST’S PARENT/GUARDIAN NAME (PLEASE PRINT): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency phone number at which the PARENT/GUARDIAN may be reached during the event:

PHONE NUMBER:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PLEASE NOTE: **Three signatures are needed to complete this form**

***The individual listed above is a student in good standing at our school:***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name of School Administrator Phone Number of School Administrator

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of School Administrator**

NGHS reserves the right to exclude or remove anyone prior to or during the dance at the discretion of the school authorities.

\_\_\_\_Approved \_\_\_\_Denied

**COVID-19 Verification**: **To be filled out and signed by Parent/Guardian of the Guest Student**

1. Have you, someone living in your household, someone you are closely associated with, or someone you are caring for been diagnosed with COVID-19 (Coronavirus) or had contact with a confirmed case of COVID-19? Circle One: **Yes or No**
2. Have you, someone living in your household, someone you are closely associated with, or someone you are caring for been tested for COVID-19 in the last 14 days? Circle One: **Yes or No**
3. Do you currently have, or have you had within the last 24 hours, any cold or flu symptoms (see symptom list) without the use of symptom reducing medicines? Circle One: **Yes or No**

**COVID 19 SYMPTOMS:** Symptoms may appear 2-14 days after exposure to the virus. People with these symptoms may have COVID-19: Fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste of smell, sore throat, congestion or runny nose, nausea or vomiting, diarrhea.

Parent signature verifies that the answers to all three questions above are **No** and that my child is in good health.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  \_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent Signature** Date

NGHS DANCE REGULATIONS

* Students who leave the dance will not be permitted to return.
* No beverages or food will be permitted except those sold or provided at the dance.
* School behavioral rules and consequences will apply for all attendees.
* Chaperones and supervisors have the authority to determine what constitutes inappropriate behavior/dress.

As the guest student, I agree to abide by all regulations and to follow any directions or requests given by adult chaperones or supervisors.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Guest Student**