

Menlo-Atherton High School EVENT GUEST PASS

555 Middlefield Road Atherton, CA 94027 (650) 322-5311 This pass is for: 2020 Prom Event

**************************DEADLI M-A STUDENT INFORMATION:	INE IS MAY 20TH-NO EXCEPTIO	ONS****	****	****	****	***	****
Student Name:	ID Number:	G	rade:	9	10	11	12
I understand that my guest and I will be attending the above named event. Further for any misbehavior or violation of school community service, or suspension from	rthermore, I understand that M-A Ad nool behavior policies including but no	ministratio	n will	assig	n cor	iseque	ences
Student Signature:	Date:						
Parent/Guardian Signature:	Date: _						
Parent/Guardian Phone Number/s:							
Event guests must not be more than 2	ure ID must be attached to this form b	ent/guardiai					eir age,
Guest Name:	Age:	Grade:	9 1	0	11	12	N/A
I understand that as a guest of the aborules and policies while attending the areserve the right to remove me from the misbehavior or violation of school below.	above named event. Furthermore, I uhe event and contact my parent/guard	ınderstand	that N	I-A	Admi	inistra	tion
Guest Signature:	Date:						
Parent/Guardian Signature:	Date: _						
Parent/Guardian Phone Number/s:							
GUEST SCHOOL ADMINISTRAT	TION OR EMPLOYER:						
School/Company Name:	Phone:					□ N	/A
The above named "guest"/employee is there is no reason why he/she should in				est o	f my	knowl	edge,
Administrator/Employer Name:	Ph	none:					
Signature: M-A ADMINISTRATION OFFICE	Date:						

Signature: ______ Ext. ____ Date: _____