



DANCE GUEST PERMISSION FORM

Dear Parent or Guardian:

Please read this entire form and sign in the appropriate locations. Your signature indicates that you have read, understood, and agreed to the contents of the entire form. This permission form must be completed and approved by the administration prior to the event.

Maine Arts Academy Student Information

STUDENT'S NAME: _____ GRADE: _____

My student, named above, has my permission to bring the below named guest to the dance on (date) _____.

PARENT/GUARDIAN SIGNATURE: _____

MeAA ADMINISTRATOR'S SIGNATURE: _____

GUEST INFORMATION

GUEST NAME: _____ GRADE _____

PARENT/GUARDIAN NAME: _____

PARENT/GUARDIAN PHONE: _____

MEDICAL CONDITIONS: ___ Yes ___ No If yes, please describe:

Any masking requirements will be announced to the student body prior to the dance.

HIGH SCHOOL ATTENDING: _____

GUEST ADMINISTRATOR'S NAME: _____

GUEST ADMINISTRATOR'S SIGNATURE*: _____

**Signing indicates said student is in good standing at your school.*

In the event of an emergency, the guest student's parent/guardian will be contacted. When immediate medical attention seems essential, Maine Arts Academy personnel will contact emergency personnel to transport the student to an appropriate medical facility by ambulance.

My student understands and agrees to comply with the rules governing dances and general conduct. In the event of an infraction, I will be contacted and make arrangements to pick my student up from the dance location.

GUEST PARENT/GUARDIAN SIGNATURE: _____

******COMPLETED FORM MUST BE RETURNED NO LATER THAN 4 DAYS PRIOR TO THE DATE OF THE DANCE******