



Cicero-North Syracuse High School Guest Application Form



This form must be completed in order to purchase tickets.

1) Event to Attend: **C-NS High School Junior Prom** Date: **May 18, 2024**
 C-NS Student Name: _____ Grade: _____
 C-NS Student Signature: _____
 C-NS Parent Signature: _____
 Telephone Number: _____ Emergency Contact Number: _____

Guest Parent/Guardian: (All guests must be in 9th grade or higher, but not over the age of 20)

Guest Student Name: _____ Date of Birth: _____ Grade: _____
 Address: _____ Telephone Number: _____
 _____ (Night of Event)

Guest Parent/Guardian Name: _____ Emergency Contact Number: _____

- Guests are expected to comply with all policies and rules contained within the C-NS High School Student Code of Conduct and the District Code of Conduct.
- Guests must bring a photo ID to the event.**

I hereby grant permission for the _____ School District to complete the following information about my child named above and to provide it to the C-NS High School Principal or his/her designee for the purpose of determining my child's eligibility to attend the above mentioned C-NS High School event as a guest.

Guest Parent/Guardian Signature: _____ Date: _____

2) **Guest School:** (To be completed by Guest's School Administrator**) Call 315-218-4100 with any concerns.

High School & Year of Graduation: _____
 Telephone Number: _____

- 1) Is student currently in good standing? YES NO
- 2) If your district held a special event, would this student be allowed to attend? YES NO
- 3) Does the student have any record of violence, weapons, drugs/alcohol on school property? YES NO

If yes, please explain: _____

**Name of person completing this form: _____ Title: _____

Signature: _____ Date: _____

- **Guest's School Administrator, please FAX this completed form with the attending student's photo to C-NS High School at 315-218-4185 or Scan to: CNSGuestForm@nscsd.org**

C-NS High School Administration

_____ Approved _____ Disapproved C-NS Administrator's Signature _____