JAMES MADISON HIGH SCHOOL

2500 James Madison Drive Vienna, VA 22181 703-319-2300

GUEST PERMISSION FORM

Event Name:	Event Date:
Madison Student:	Printed Name/Grade Signature
	Printed Name/Grade Signature
Guest Information:	
Name:	Signature:
Emergency Contact Na	me: Phone Number:
Current School:	
or Madison Alumni Cla	ss of:
If guest is not attending	school, list your guest's place of employment and phone
number. Work:	Phone Number:
 Guest must conform to all expectations in the FCPS Student Responsibilities and Rights booklet. You may only bring one guest and must arrive at the event with the guest. You will not be admitted separately. Guest may NOT be a middle school student and must not be 21 or older. Guest must present a photo ID to enter the event. 	
To be completed by guest	's administrator, supervisor, or commanding officer:
The guest listed above is responded in the Madison High School's Dance	onsible and of good character. He/She is recommended to attend
Signature:	
Date:	Phone Number:

You must present Student ID and guest form at the door.

If you have any questions, please speak with Mr. Baird in the Activities Office.