CHAPARRAL High School / SNOWLINE ACADEMY
Winter Event Permission Slip & Contract
February 1, 2025 6:00pm-10pm / Serrano HS
"Euphoric Night"

This form must be completed and turned in when you pay for your Winter Event ticket ($25).
Please pay with Mrs. Carlson in the front office, CASH ONLY.
All tickets must be purchased by January 30th

NTS Student (print):_____Grade:_____ Phone:_____
I agree to be responsible for my guest's actions and adherence to Serrano High School rules. Failure to do so will jeopardize my privilege to attend Serrano High School dances in the future.

NTS Student Signature _____ **NTS Parent Signature**_____

NTS Administrator Approval:_____**Date:**_____

NTS GUEST Information - GUESTS MUST BE 18 years of age or younger, and a CURRENT HIGH SCHOOL STUDENT. Sorry, no College or Middle School students. Guest ticket $30

NTS Parent Acknowledgement: I have reviewed the information provided and give my permission for my son/daughter to attend the dance with the person listed below. You may contact me at this phone number if needed.
Emergency phone number:_____

NTS Parent Name (print): _____

Guest Name (print):_____**Age:**_____**Phone**: _____

Grade (circle one) 9 10 11 12

Guest Parent/Guardian Name (print):_____ **Phone:**_____

- As a guest at Serrano High School's dance, I understand that I am under the jurisdiction of Serrano High School and must follow all school rules-including dress code. Failure to do so may be grounds for my removal from this event without refund.

_____ _____ _____
Guest Signature **Guest Parent/Guardian Signature** **Date**

Guests must complete this form and must submit a copy of his/her current school ID, or a copy of his/her driver's license at the time of the ticket purchase.

1. GUEST IS A CURRENT HIGH SCHOOL STUDENT
(MUST BE A CURRENT STUDENT AT A HIGH SCHOOL, No College or Middle School Students Allowed)
Guest must attach a photocopy of a current student ID with this application.

Name of High School currently attending:_____ City:_____

GUEST must have this form signed by his/her school administrator. NO EXCEPTIONS.

____ Yes, we recommend this student to attend your event and have no behavior concerns.

_____ _____ _____
Administrator Name Position/Title School/Office Phone

_____ _____
Signature of Administrator Date *School Stamp here:*

APPROVED BY:
SHS Administration Signature:_____**Date:**_____