



# Kenmore East High School

*An International Baccalaureate World School*



Patrick Heyden, Principal   Elaine Thomas, Operations Principal   Joseph Greco, Assistant Principal

350 Fries Road • Tonawanda, NY 14150-8899 • (716) 874-8402 • Fax (716) 874-8443

## **GUEST AUTHORIZATION RELEASE FORM**

**KEHS Student's Name:** \_\_\_\_\_

**Permission is hereby granted for Kenmore East High School (KEHS) to receive information about the following person:**

**Guest's Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Activity requested to attend:** \_\_\_\_\_

**Guest's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Parent Signature of Guest:** \_\_\_\_\_

**Date:** \_\_\_\_\_

- **Return this form to Mr. Greco's office. If approval is granted, you may then purchase a ticket for a guest from his office. This form will be retained by KEHS.**
- **Only one guest is allowed per student.**
- **All participants are expected to comply with the KEHS Code of Conduct.**
- **All participants need to have picture identification to be admitted to KEHS activities.**

### **To be Completed By School Administrator or Employer of Guest**

A KEHS student has invited the above named person as a guest to a KEHS activity. Please complete the following information so that we may obtain some background on the guest. Thank you for your assistance.

Name of school where guest is enrolled: \_\_\_\_\_

If guest is not enrolled in school, please name employer: \_\_\_\_\_

If there is any reason why this guest should be excluded from our school activity, please explain. \_\_\_\_\_

Name of person completing form: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Phone: \_\_\_\_\_ Date: \_\_\_\_\_

Please fax completed forms to Mr. Joseph Greco, (716) 874-8443 or return via student to Kenmore East High School, Room 117. This form must be faxed or returned at **least two days** before the event.