

Homecoming Guest Information Form

CHS Student Name Printed: _____

Guest Name Printed: _____

School Enrolled/Affiliation: _____

Age on September 30, 2023 _____ (no guests may be over the age of 19)

By signing below I am acknowledging that I am aware of the Fulton County Schools', as well as Centennial High School's, behavior policy and Code of Conduct. I also understand that there will be consequences for failure to adhere to these policies during my attendance at this years' CHS Homecoming. The administration reserves the right to use reasonable means to discern if students and/or guests are under the influence of prohibited or controlled substances; including but not limited to a breathalyzer test.

Signature of CHS Student: _____

Signature of Guest: _____

Parent of
CHS Student Signature: _____

Parent of CHS Student Printed Name: _____

Parent of CHS Student Cell Phone: (_____) _____

For Guest's School Administrator: This student would be allowed to attend a similar event at our school.

Administrator's Signature: _____

Administrator's Printed Name: _____

Deadline to submit this form is Monday, September 25th, 2023 to Ms. Mobbs in H64 . This form must be accompanied by a copy of the guest's picture ID which includes a birthdate. Please staple the guest form and photo ID together before turning them in.