

PRAISE ACADEMY Student's Name:				Grade:			
Th	e following information m					ces.	
			th school must be 20 yea MY office <u>at least 2 days</u>		-		
Guest's Nai	me:			Grade:	Gender:	М	F
Guest's Add	dress:						_
Age:	DOB:	[Driver's License Numb	er:			_
Home Phor	ne Number:		Emergency Phon	ie Number:			_
Current Sch	nool:						_
Current Sch	nool Address:						_
Dance you	will attend with studen	t from PRAISE AC	ADEMY:				
Are you a fo	ormer PRAISE ACADEM	Y Student? Y	Y N				
If yes, reaso	on for leaving PRAISE A	CADEMY:					_
	Please at	tach a copy of the	e guest's Driver's Lice	ense to this for	m.		
	DEMY Administration wou lation below. Thank you f estudent.)					oot be relate	d - - -
Signature:			Position/Title:				- - -
Printed Nam	e:		Phone Number:		Date	:	_
that failure t	This section must be y the policies and procedu o do so could result in bei	ures of PRAISE ACAE	he dance.	he Code of Cond	duct guidelines. I		
	DEMY Student Signature: _						
	DEMY School Administration						
Approved By				D	ata		