



Prom Guest Registration Contract

I agree to supply completely and truthfully the information below. I understand that PA Cyber’s Administration has the right to verify this information. I also understand PA Cyber has the right to refuse admittance of my guest to the Prom

PA CYBER STUDENT

PROM LOCATION

PA Cyber Student Name (Printed)

Grade

- Eastern/Central Prom
- Western Prom

STUDENT GUEST

Guest Name (Printed)

Grade

GUEST SCHOOL ADMINISTRATION

I affirm that the information on this form regarding the student guest is correct and that this student is in good standing at this school. I recommend that this student be allowed to attend this PA Cyber event.

Guest’s School Administrator/Dean (Printed)

Guest’s School Administrator/Dean (Signature)

Guest’s School Administrator/Dean Phone Number ()
Area Code

GUEST PARENT

Guest’s Parent Name (Printed)

Guest’s Parent Name (Signature)

Guest’s Emergency Contact Name/Relationship (Printed)

()

Phone Number

COMPLETE THIS SECTION IF THE GUEST HAS GRADUATED OR NO LONGER ATTENDS HIGH SCHOOL

Guest’s College or Place of Employment (Printed)

Guest’s Parent Name (Signature)

Relationship (Printed)

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Phone Number

STUDENT GUEST’S SIGNATURE

I have read the rules regarding my attendance at the PA Cyber Prom. I understand that as a guest I must abide by the same rules and standards to which all PA Cyber students must adhere.

Guest’s Printed Name

Guest’s Printed Name

RETURN FORM TO Prom Committee
1200 Midland Ave
Midland, PA 15059

OR EMAIL promcommittee@pacyber.org