



Gorham Middle & High School
120 Main Street, Gorham, NH 03581

REQUEST TO ATTEND A GORHAM MIDDLE HIGH SCHOOL FUNCTION

To be completed by visitor's school:

Name of GMHS Student: _____ GMHS Student's Phone: _____

Name of Visitor: _____ Visitor's Phone: _____

Visitor's Address: _____

Visitor's DOB: ____/____/____ Visitor's School: _____

Visitor's School Location: _____ Visitor's School Phone: _____

_____, a student enrolled at _____,
(name of visiting student) (visiting student's school)

Is requesting to attend _____ on _____
(description of school function) (date of function)

hosted by Gorham Middle High School (GMHS).

**(signature of visiting school's administrator) (school position) (school phone & extension)*

**The administrator's signature serves as a recommendation & confirmation of the visiting student's good citizenship.*

To be completed by GMHS student's parent/guardian:

I am aware of my son's/daughter's request to bring a guest to a GMHS function. If approved. My son/daughter accepts responsibility for his/her guest.

(printed name of parent/guardian) (signature of parent/guardian) (date)

Approved Not Approved _____
(signature of GMHS Administrator) (date)

Principal
[Jen Corrigan](#)
603.466.2776
x3001

Dean of Students
[Lynne Grigelevich](#)
603.466.2776
x3002



Director of Guidance
[Christine A. Lemoine](#)
603.466.2776
x3004

Guidance Counselor
[M. Matthew Saladino](#)
603.466.2776
x3005