



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)