



KNOB NOSTER HIGH SCHOOL

504 S. Washington, Knob Noster, Missouri 65336

660-563-2283 FAX 660-563-3384

Connie Morris, Principal
Adam Easterwood, Asst. Principal

Ray Maxwell, Counselor
Amanda Wesley, Counselor

Guest Permission Form for School Activity

Event _____

Date _____

KNHS Student _____

Grade _____

Age _____

KNHS Student Parent's Signature

To be completed by guest:

Guest's Name _____ Grade _____ Age _____

Address _____

Home Phone _____

Parent/Guardian _____

School Name _____

School Phone & Fax _____

NOTE: If guest is not in school a copy of Driver's License or State ID must be provided with signed form.

I agree to obey all rules and regulations set forth by Knob Noster High School concerning student attendance at extracurricular activities.

Guest Signature

DEADLINE TO SUBMIT THIS FORM TO KNHS ASSISTANT PRINCIPAL IS TUESDAY BEFORE THE DANCE.

Principal's Recommendation

To be completed by Guest's Principal:

Please check the appropriate response according to the above student's status.

- I recommend the above student.
- I do not recommend the above student.
- Student is under current suspension

Principal's signature _____

This form must be completed in its entirety and returned to Knob Noster High School by fax or at the address above. Thank you for your cooperation in this matter.