



## PROM GUEST PERMISSION FORM

NAME OF HOST (FIRST & LAST): \_\_\_\_\_

NAME OF GUEST (FIRST & LAST): \_\_\_\_\_

This completed form must be returned to the Dean of Students, including all signatures, **no later than April 7th** for the guest to be approved.

### AGREEMENT

As a student of Tilton School, I understand that I am accountable for my behavior and the behavior of my guest at this event. The event includes all activities before, during and after related to the Tilton School 2023 Prom.

In addition, by submitting this form, my guest and I, as well as our parents/guardians, understand and agree to the following:

- Guests, as with their hosts, are expected to abide by the Tilton School Community Standards outlined in the [2022-23 Tilton School Student Handbook](#).
- Age limit for guests at this event is 20 years old.
- Guests and hosts will be removed from the event if behavior is deemed inappropriate by the School or chaperones, and a guest and their host may be subject to further disciplinary action. Families of guests who are asked to depart the event are expected to pick up their child immediately.
- Guests must remain with their host at all times.
- Guests may not drive themselves to or from campus; guests must arrive to campus with a parent and/or with their host. Hosts may transport guests to and from campus with parent permission from parents/guardians of both the host and their guest.
- Families of student hosts and their guests are responsible for students during travel to and from campus prior to and after the event.

- All students and guests will be transported by Tilton School between the Prom venue and campus. Students may not travel directly to or from the venue except by Tilton School provided transportation.
- Tilton Students, including day students, who will be attending the event will be asked to give their keys to the AOD prior to departure. Students may not retain an extra set of keys with them.
- Keys will be returned to students transporting themselves off campus by the AOD at the end of the evening. A text notification will be sent to a parent of the Tilton student who is departing in their own vehicle when the key is returned. Students and their guests are expected to depart campus immediately after receiving their keys and may not return to dorms after that time.
- Students or guests will not be permitted to bring bags, backpacks, drinks or water bottles to the event. Small purses/satchels are permitted and may be inspected by the chaperones, AOD or Dean of Students at any time prior or during the event.
- Guests may not enter student residence halls for any reason. Bathrooms are available at the location of the check-in, venue, and check-out locations.
- Guests will not be permitted to stay on campus overnight.

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*By signing this form, you are affirming your understanding and agreement to the above.*

**HOST INFORMATION**

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TILTON STUDENT NAME (FIRST, LAST)

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SIGNATURE

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DATE

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PARENT NAME (FIRST, LAST)

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SIGNATURE

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DATE

**GUEST INFORMATION**

*By signing this form, you are affirming your understanding and agreement to the above.*

GUEST FULL NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

SIGNIFICANT MEDICAL INFORMATION/ALLERGIES: \_\_\_\_\_

EMERGENCY CONTACT/RELATIONSHIP TO GUEST: \_\_\_\_\_

EMERGENCY CONTACT PHONE NUMBER: \_\_\_\_\_

\_\_\_\_\_  
GUEST NAME (FIRST, LAST)

\_\_\_\_\_  
GUEST SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
GUEST'S PARENT/GUARDIAN NAME (FIRST, LAST)

\_\_\_\_\_  
GUEST'S PARENT/GUARDIAN SIGNATURE

\_\_\_\_\_  
DATE

GUEST'S CURRENT SCHOOL OF ATTENDANCE: \_\_\_\_\_

SCHOOL ADDRESS (TOWN, STATE): \_\_\_\_\_

SCHOOL PHONE #: \_\_\_\_\_

**FOR COMPLETION BY SCHOOL ADMINISTRATOR AT THE GUEST'S CURRENT SCHOOL**

STUDENT NAME: \_\_\_\_\_

To Whom it May Concern:

*This above student is seeking permission to attend the Tilton School Prom as a guest. By signing this form, you verify that the student above is currently enrolled at your School and has no disciplinary infractions within the last year or other behavioral issues of concern that would prevent this student from receiving permission to attend a similar event at your school. We appreciate your support in our efforts toward a successful event.*

\_\_\_\_\_  
SCHOOL ADMINISTRATOR NAME

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

Please return this form to:

Chapel Love, Dean of Students  
Tilton School, Tilton NH  
[clove@tiltonschool.edu](mailto:clove@tiltonschool.edu)  
603-286-1739