



20 S. Woodrow Avenue • Battle Creek, MI 49015 • 269-965-5560 • Fax 269-965-8038
www.calhounchristian.org

Guest Student Application

In order to be a guest at Calhoun Christian School's Banquet, students who do not attend Calhoun Christian School are required to complete this form and return it to the school office no later than **3 days before** the date of the Banquet. A student/guest that is currently out of school will still need to fill out this form and may be required to meet with Jeralyn Belote, Administrator at Calhoun Christian School.

All students/guests must be at least in the ninth grade and no older than 20 to attend Banquets at Calhoun Christian School. There is a limit of one guest per student.

No ticket will be sold to a Calhoun Christian School student that is hosting a student from another school unless this form is on file. All tickets for the guest must be purchased prior to the date of the Banquet.

GUEST STUDENT SECTION: (to be completed by the Guest and Guest's Parent)

Please bring ID with you to the event. No ID = no entry, no refund

Calhoun Christian School student you are accompanying: _____

Guest Name: _____ **Grade:** _____ **Age:** _____

Address: _____ **City:** _____

Home Phone: _____ **Parent Cell Phone:** _____

School Attending: _____ **School Phone:** _____

In case of emergency contact: _____

I understand that I must abide by all rules of Calhoun Christian School, including the dress code policy. I must also comply with requests as made to me by the staff of Calhoun Christian School. Failure to follow school policies or staff requests will result in removal from the Banquet. Any issue involving substance abuse will involve police action as well as informing the sending school and parents of the incident.

Guest's Parent Signature: _____

(not required for students over 18 years of age)

Guest's Signature: _____

(Any false information with forfeit the right to attend this event)

ADMINISTRATOR'S SECTION: (to be completed by the Guest's Principal)

(This section is not required if the guest is out of high school)

If you have concerns regarding the above named student, please call me at 269-965-5560. If you give your approval of this student, please fax this form with your signature to 269-965-8038. Thank you.

Administrator's Signature: _____

Administrator's Printed Name: _____

Phone: _____