



Central High School

216 E. Orman Avenue

Pueblo, CO 81004

Phone: 719) 549-7303 / Fax: (719) 549-7319

CENTRAL HIGH SCHOOL STUDENT INFORMATION

Name _____ ID No. _____ Grade _____

C.H.S. School Event _____ Date _____

Parent/Guardian Name _____ Phone _____

GUEST INFORMATION

(1 Guest per Central High School Student)

Name _____ Age _____ Grade _____

Current Address _____

Parent/Guardian Name _____ Phone _____

Name of School Currently Attending _____ Phone _____

I agree to respect and abide by all school policies and regulations established at Central High School. I understand that failure to abide by these policies will result in my immediate removal from this school event.

GUEST SCHOOL ADMINISTRATOR

(Please complete the following section and return to your student)

- This individual is currently a student at our school and is in good standing.
- This individual is currently a student at our school and is *NOT* in good standing.
- Please contact me about this student. Phone No. _____
- This individual is NOT currently enrolled at our school.*

School Administrator's Signature _____ Date _____

School Administrator's Position _____

- **Guest MUST be attending a High School.**
- **This form is due back by: The Thursday before function. NO Exceptions!**