

Parent or Guardian Signature

2025 Greenfield High School Prom Ticket Application for GHS Students

	Student Name:		
	Grade:	Age:	
			HS Junior or Senior student you are
Address :			
Emergency Cont	act Telephone# :	******* (No	t the student's cell number) ******
Please list any food allergies we should be aware of :			
when prom The phone r at. If guardia Back (aback	is over, and to mainumber you listed ans will not be at to @greenfield.k12.w	ke your expectations above must be a phor the above number on vi.us) or Taylor Werm	w where your son/daughter is going with regard to his/her behavior clear. ne number that parents can be reached prom night, please email Amanda and to the event and provide an
	nergency contact r	•	
Signing this fo	orm indicates an a	greement to follow al	ll rules listed on the previous page.
Parent or 0	Guardian Printed First and Las	t Name	Relationship to Student

Date