



Episcopal School of Jacksonville Guest Form

Episcopal wants every guest to have a safe and enjoyable experience at our events. ESJ students and their guests must complete this form and return it to the Dean's Office three days prior to the event.

Event Name _____

Event Date _____

To be completed by the ESJ Student:

I understand that I am responsible for the behavior of my guest who is not enrolled in Episcopal

Name (print) _____ Grade _____

Student Signature _____ Cell Phone _____

Parent Signature _____

To be completed by the Guest:

I must abide by the rules set forth by Episcopal in which include, but or are not limited to:

- ☐ I will provide a COPY OF MY DRIVER'S LICENSE OR CURRENT SCHOOL ID WITH THIS FORM.
- ☐ I understand that this event is a "lock-in"; meaning, I will not leave until the end of the event.
- ☐ I will not use or possess alcohol, tobacco, drugs, or any paraphernalia including vape products.
- ☐ I will not use or possess any item that can be deemed a weapon.
- ☐ I will not engage in inappropriate public displays of affection or obscene acts to include dancing.
- ☐ I understand that I may not attend the event if I am 21 years of age or older.

Guest Name (print) _____ Guest Cell Phone _____

Parent Name (print) _____ Parent Cell/Home Phone _____

Parent Signature _____

Check the appropriate box:

- ☐ I am currently enrolled in high school. (Administrator's signature required)
- ☐ I am currently home-schooled or enrolled in college. (Administrator's signature not required)

School (print) _____

Name of Dean/Principal (Print) _____ Contact Number _____

Signature of Dean/Principal _____