

Southview High School

Dance Rules and Expectations

Behavior

- Student behavior is expected to reflect standards of the Southview Community and Southview High School and be in accordance with the expectations and rules of our school.

Dress Code

- Girls: Dresses must be of appropriate length (i.e.: finger-tip length). They must stay that length and not be “hiked up” during the dance.
- Boys: A shirt with collar must be worn.
- General: No jeans, no hats.
 - **Consequences:** Students will not be allowed into the dance unless they are dressed appropriately.

Dancing

- Students will be given a bracelet upon entry to the dance.
- Dancing cannot imitate a sexual act. Hands need to be placed appropriately.
 - **Consequences—** At the 1st offense, students will get bracelet removed as a warning. At the 2nd offense, students will be removed from the dance and a parent will be notified.

Guest Passes

- Students from other high schools will be allowed to attend our school dances as a guest of a current student. They must turn in a permission form signed by their parents and current school administrator.
- Junior High students are not allowed at high school dances.
- All guests must be under the age of 21.

Drugs/Alcohol

- Students may be tested for alcohol and drugs if reasonable cause exists.
 - **Consequences:** If the test is positive, school consequences will be issued by the administration and the police will also issue community consequences.

***Note:** Any Agent/Representative (including chaperones) have the right to remove any person from the dance who is in violation of the above rules and expectations and the student will not be entitled to any refund of monies paid.

I agree to abide by the Southview High School rules and expectations.

Printed Student Name: _____

Student Signature: _____

Printed Parent Name: _____

Parent/Guardian Signature: _____

Parent/Guardian contact phone number during the dance: _____

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DANCE GUEST FORM

For the safety of our students and guests, we ask that our students have their guests complete this form. Southview students must return this completed form to the office three (3) days prior to the dance.

Name of Southview Student: _____ ID# _____
(PLEASE PRINT)

Guest Information: If the guest has graduated, please complete only the information requested at the bottom of this form.

Please PRINT the following information:

Name: _____ Grade _____
School Attending: _____
Name of Principal: _____
Signature of Principal: _____
Name of Parent: _____
Home Phone Number: _____
Emergency Number: _____
Signature of Parent: _____

For guests that are high school graduates:

Name: _____ Age: _____
Emergency Contact Number: _____

SYLVANIA CITY SCHOOLS - EMERGENCY MEDICAL AUTHORIZATION

The purpose of the following form is to enable parents and/or guardians to authorize the provision of emergency treatment for children who become ill or injured while under school authority, when parents and/or guardians cannot be reached.

EITHER PART I OR PART II MUST BE COMPLETED

PART I

I hereby consent, in the event reasonable attempts to contact either parent or guardian have been unsuccessful, for (1) the Administration of any treatment deemed necessary by my preferred doctor or dentist; or in the event the designated preferred doctor or dentist is not available, by another licensed doctor or dentist; and (2) the transfer of the child to my preferred hospital or any hospital reasonably accessible.

This authorization does not cover major surgery unless the medical opinions of two other licensed doctors or dentists concurring in the necessity for such surgery are obtained prior to the performance of such surgery.

DATE _____ X _____
(Signature of Parent/Guardian)

PART II

(Do not complete if you have filled out PART I)

I do not give my consent for emergency medical treatment of my child. In the event of illness or injury requiring emergency treatment, I wish the school authorities to TAKE NO ACTION.

DATE _____ X _____