

# Little Rock Christian Academy

*Excellence in the pursuit of truth from a Christ-centered worldview*

P.O. Box 17450, Little Rock, Arkansas 72222-7450

501-975-3416

www.littlerockchristian.com

Joe Neff, Upper School Principal  
Kevin Wieser, Assistant Principal  
Patrick Salman, Director of Student Life

## **Guest Information for School Activity**

Deadline to submit this form is **one week** before the activity

**This form must be completed in its entirety and returned to Mrs. Biggs or Mrs. Smith**

Event: **Junior/Senior Prom**

Date of Event: **April 24, 2010**

LRCA Student \_\_\_\_\_ Grade \_\_\_\_\_

### **To be completed by guest:**

Guest's Name \_\_\_\_\_ Grade \_\_\_\_\_ Age \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Parent cell phone \_\_\_\_\_

Guest's School (name) \_\_\_\_\_

Guest School Phone Number \_\_\_\_\_

**Guests who are not enrolled in another high school will be screened by the administration of LRCA.**

**I agree to obey all rules and regulations set forth by Little Rock Christian Academy concerning student attendance at extracurricular activities, including dress code.**

\_\_\_\_\_  
**Guest Student Signature**

\_\_\_\_\_  
**LRCA Student Signature**

\_\_\_\_\_  
**Guest Parent Signature**

\_\_\_\_\_  
**LRCA Parent Signature**