



Westborough High School

Mr. Brian M. Callaghan, Principal
Mrs. Jessica M. Barrett, Assistant Principal
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**Guest Verification form for School Functions
Form must be completed and returned by 2 pm the day prior to the Event**

TO BE FILLED OUT BY WHS STUDENT

The student named below has been invited by:

Student Name: _____ Grade: _____

Name of Function: _____ Date of Function: _____

Emergency Contact Name & Number: _____

Parent/Guardian Signature: _____

TO BE FILLED OUT BY INVITED GUEST

Guest Name: _____ Grade: _____

School Enrolled for Current School Year: _____

Guest Parent/Guardian Information:

Name: _____ Phone: _____

Relationship to Guest: _____

Parent/Guardian Signature: _____

TO BE FILLED OUT BY INVITED GUEST'S SCHOOL ADMINISTRATION

Yes No The student is in good standing and has not been suspended for infractions of school rules.

Administrator Signature: _____ Date: _____

Title: _____ Phone: _____

PLEASE FAX TO 508-836-7723, Thank you

WHS Administrator: _____ **Date:** _____

The Westborough Public Schools do not discriminate on the basis of race, color, sex, religion, national origin, sexual orientation, or disability.