



# ABSENCE REQUEST FORM

NAME OF ATHLETE: \_\_\_\_\_ DATE: \_\_\_\_\_

TEAM: \_\_\_\_\_

REQUESTING TO BE ABSENT:

MONTH: \_\_\_\_\_ DAY: \_\_\_\_\_ TIME: \_\_\_\_\_

SCHOOL ACTIVITY: \_\_\_\_\_

VACATION/OTHER: \_\_\_\_\_

WILL YOU BE ABLE TO ATTEND ANY PORTION OF THE SCHEDULED PRACTICE?

YES - OR - NO

IS SO WHICH PART? \_\_\_\_\_

\_\_\_\_\_  
(athlete's initials) **I KNOW THAT SCHOOL RELATED ACTIVITIES FOR A GRADE ARE THE ONLY EXCUSED ABSENCES.**

\_\_\_\_\_  
(athlete's initials) **I AM AWARE THAT MY ABSENCE CAN AND WILL AFFECT THE REST OF THE TEAM PRACTICE.**

\_\_\_\_\_  
(athlete's initials) **I KNOW THAT MY PARTICULAR STUNT OR STUNT GROUP WILL NOT BE ABLE TO PRACTICE AND ALL SPACING AND FORMATIONS WILL BE AFFECTED BY MY ABSENCE.**

\_\_\_\_\_  
(athlete's initials) **I PROMISE TO LEARN ANY NEW OR CHANGED MATERIAL PRIOR TO MY NEXT PRACTICE.**

\_\_\_\_\_  
(athlete's initials) **I UNDERSTAND UNAPPROVED ABSENCES MAY JEOPARDIZE AN ATHLETE'S POSITION AS A PERMANENT MEMBER OF A TEAM.**

\_\_\_\_\_  
ATHLETE'S NAME

\_\_\_\_\_  
PARENT'S NAME

\_\_\_\_\_  
ATHLETE'S SIGNATURE

\_\_\_\_\_  
PARENT'S SIGNATURE