Absence Request Form

Athlete Name:		Date:		
Team:		Coach:		
REQUESTING TO B	E ABSENT: (Form must be	turned in 14 days prior to	o absence)	
Begin Date:	End Date:			
REASON				
Absences are excused/un	excused as follows:			
Excused Absences:	Unexcused Absences:	Excused Absences (w/ 2	week notice):	
Contagious Illness	Injuries	Religious Observance		
School function that affects grade	Traffic	School Dance		
Death in the family Vacation during the summer	Too much homework Feeling tired			
vacation during the summer	Don't have a ride			
	Rec/School Cheerleading			
I understand that all-star cl team.			being a part of a	
1, 0 1	ot be able to practice as a resu	ult of my absence.	•	
3. I promise to learn any new4. I understand that unapprov			ce.	
X	X			
Athlete Signature	Parent Sign	Parent Signature		
X	Approved:	Yes No		
XCoach Signature				
Comments:				
Comments:				

You will receive a copy of this form back within 3 days letting you know if your time was approved.

NO ABSENCES WILL BE APPROVED DURING THE 2 WEEKS BEFORE ANY COMPETITION!