



## ABSENCE REQUEST FORM

<b>STUDENT'S NAME</b>	<b>DATE ( MM/DD/YYYY )</b>
	/ /
<b>TEAM NAME</b>	<b>ABSENCE REQUEST DATE ( MM/DD/YYYY )</b>
	/ /

<b>WILL YOU ATTEND ANY PORTION OF THE SCHEDULED PRACTICE? IF SO, WHICH PART?</b>

<b>REASON FOR ABSENCE</b>			
<input type="checkbox"/> School Activity Resulting in a Grade	<input type="checkbox"/> Family Passing	<input type="checkbox"/> Contagious Illness	
<input type="checkbox"/> Other. REASON:			

1. I AM AWARE THAT THIS IS A TEAM SPORT AND THAT MY ABSENCE WILL AFFECT THE REST OF THE TEAM'S PRACTICE. BUILDING ELEMENTS SUCH AS STUNTS, PYRAMID AND BASKETS IN WHERE I AM INVOLVED WILL BE UNABLE TO PRACTICE ON THESE DATES AND THERE WILL BE GAPS IN FORMATIONS DURING THE ROUTINE. THAT BEING SAID, I PROMISE TO LEARN ANY NEW OR CHANGED MATERIAL PRIOR TO MY NEXT PRACTICE AND I WILL DO MY BEST TO GATHER MY STUNT GROUP IN TO PRACTICE EXTRA.
2. I UNDERSTAND THAT IT IS NOT THE COACHES JOB TO CATCH ME UP WITH ANY MATERIAL MISSED.
3. UNDERSTAND THAT I AM ONLY ALLOWED 2 ABSENCES THROUGHOUT THE COMPETITIVE SEASON (AUG 1st THROUGH MAY) AND THAT ANY ADDITIONAL ABSENCES COULD RESULT IN THE CHANGE OF MY POSITION ON THE TEAM. THIS CHANGE MAY INCLUDE BECOMING AN ALTERNATE, SUSPENSION, OR REMOVAL FROM THE TEAM.
4. I UNDERSTAND THAT ABSENCES WITHIN 2 WEEKS OF A COMPETITION ARE GROUNDS FOR AUTOMATCIC SUSPENSION FROM THE FOLLOWING EVENT.
5. I UNDERSTAND THAT COACHES HAVE THE RIGHT TO ADD PRACTICES DUE TO ANY ABSENCE.

<b>STUDENT'S SIGNATURE</b>	<b>PARENT'S SIGNATURE</b>

	Yes	No
<b>COACHE'S SIGNATURE</b>	<b>APPROVAL ( STAFF USE ONLY )</b>	

*Please print out, sign, & remit this form to both your team coach & representative either via email as an attachment or in person.*