



ABSENCE REQUEST FORM

I understand that when Athlete misses team practice, it devastates the team's ability to effectively train that day and may result in rearrangement of Athlete's position in the routine, if that benefits the team as a whole.

Non-emergency practice absences can ONLY be considered for pre-approval when submitted at least 1 month in advance. Approved absences include school functions that result in a grade and summer time family vacations. Excused emergency absences include illness (with a doctor's note) or a death in the family. Absences due to circumstances like birthdays, transportation issues, to attend school dances or due to homework/studying are not considered "excused". Any missed practice that does not have (1) a timely approved Absence Request Form filed or (2) meet the excused emergency absence criteria (including providing a doctor's note for illness) will be considered unexcused. All absences (even for school functions or pre-planned vacations) not pre-approved with this form in advance will be treated as unexcused absences.

Training and routines are coordinated around every team member. Therefore, one member's absence has a negative impact on their individual preparation as well as on all team members. Athletes who are late or absent for a practice (whether excused or unexcused) should expect to do some conditioning to make-up for the missed time. If the absence was unapproved, **EXPECT MORE PROLONGED CONDITIONING**. Please do not forget that if an athlete has more than 3 unexcused absences throughout the season it may result in losing their spot in the routine, removal from competition, or dismissal. **NO REFUNDS WILL BE ISSUED**. A missed practice in the 2 weeks prior to a competition may result in being removed from the routine for that competition. The athlete is nonetheless required to attend the competition to support his/her teammates.

Athletes Full Name: _____

Athletes Team: _____ Date of Absence: _____

Explanation: _____

Signature: _____ Date: _____

Print Name: _____ Relationship to Athlete: _____

Please turn in your request to your Coach.

Staff Use Only:

Review: _____ Date: _____

☐ Approved ☐ Not Approved (reason why) _____

☐ Entered into records ☐ Copy provided to/mailed to Athlete