

Wolverine All Star Absence Notification Form

This form must be turned in 2 weeks prior to absence.

Date to be absent _____

Reason for Absence

I, _____ am

(Please print student's name)

requesting to be absent from practice on the date listed above. I know that missed practices negatively affect the entire team and cause serious safety concerns. I understand that continued absences can result in being placed in an alternate position in the routine or removal from the squad. More than one absence in a calendar month will result in a \$10.00 fee being charged to my Gym account for each missed practice after the first.

Student Signature _____ Date _____

Parent Signature _____ Date _____

Notes: (office use only):

Absence Fee = \$10.00 fee/absence after 1st absence of each month