



PRO SPIRIT

129 Aero Country Rd., McKinney, TX. 75071 | t: 972.346.9010 | e: INFO@pro-spirit.com

ABSENCE REQUEST FORM

ATHLETE NAME:

TODAY'S DATE:

DATE REQUESTING TO BE ABSENT START:

DATE REQUESTING TO BE ABSENT END:

TEAM NAME:

SCHOOL ACTIVITY REASON:

VACATION / OTHER REASON:

- 1. I KNOW THAT SCHOOL FUNCTIONS THAT RESULT IN A GRADE ARE THE ONLY EXCUSED ABSENCES.**
- 2. I AM AWARE THAT MY ABSENCE CAN AND WILL AFFECT THE REST OF THE TEAM'S PRACTICE. 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.**
- 3. I PROMISE TO LEARN ANY NEW OR CHANGED MATERIAL PRIOR TO MY NEXT PRACTICE.**
- 4. UNAPPROVED ABSENCES MAY JEOPARDIZE A STUDENT'S POSITION AS A PERMANENT MEMBER.**

ATHLETE SIGNATURE:

PARENT SIGNATURE:

COACH NAME: