

Marching Band Absence Request Form

Name _____ Today's Date _____

Date of planned absence _____

Reason for absence (in detail) _____

Parent Signature _____ Student Signature _____

*requests must be submitted prior to absence: 1 week for practices, 2 weeks for games/parades, and 1 month for competitions

<u>Director Only:</u>	Absence Date _____
	____ Approved ____ NOT Approved
	Signature _____ Date _____

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