



**ELCO RAIDER BAND  
EXCUSED ABSENCE REQUEST FORM**

NAME \_\_\_\_\_ Today's Date \_\_\_\_\_

Date of Rehearsal/Performance \_\_\_\_\_

Reason For Request: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Parent Signature: \_\_\_\_\_

This form must be given to the Director NO LATER than 1 week prior to a performance or 24 hours (1 day) prior to a rehearsal.

\*\*\*\*\*

Director's use only

Date received : \_\_\_\_\_

\_\_\_\_\_ Request approved \_\_\_\_\_ Request denied

Reason for denial:

\_\_\_\_\_  
\_\_\_\_\_



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