

## MVXC August 6-17, 2018 Absence Form

**My name (Print Clearly):**\_\_\_\_\_

**Year (Circle):** Freshman Sophomore Junior Senior **Gender (Circle):** Male Female

**Days I Will Miss Practice (Circle all days that you will miss):**

Aug 6 Monday Aug 7 Tuesday Aug 8 Wednesday Aug 9 Thursday Aug 10 Friday

Aug 13 Monday Aug 14 Tuesday Aug 15 Wednesday Aug 16 Thursday Aug 17 Friday

**Why I will be missing practice these days (please explain very specifically; if you are out of town for family vacation, where will you be and the dates; if you are working, where you are working and your hours and dates; if you are at a camp or internship, describe, include website, etc):**

**Athlete signature:**\_\_\_\_\_

**Parent signature:**\_\_\_\_\_

**Parent email address:**\_\_\_\_\_