

HIGHLAND SPRINGS H.S. BAND CONFLICT FORM

Note: THIS FORM MUST BE TURNED IN PRIOR TO MISSING THE ACTIVITY

Student Name \_\_\_\_\_

Parent Name \_\_\_\_\_

Section \_\_\_\_\_ Grade \_\_\_\_\_

**REASON FOR REQUEST:**

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

**PLEASE SPECIFY DATE & TIME THAT STUDENT WILL MISS ACTIVITY**

DATE: \_\_\_\_\_ MONDAY \_\_\_\_\_ : \_\_\_\_\_ AM/PM TO \_\_\_\_\_ : \_\_\_\_\_ AM/PM

DATE: \_\_\_\_\_ TUESDAY \_\_\_\_\_ : \_\_\_\_\_ AM/PM TO \_\_\_\_\_ : \_\_\_\_\_ AM/PM

DATE: \_\_\_\_\_ WEDNESDAY \_\_\_\_\_ : \_\_\_\_\_ AM/PM TO \_\_\_\_\_ : \_\_\_\_\_ AM/PM

DATE: \_\_\_\_\_ THURSDAY \_\_\_\_\_ : \_\_\_\_\_ AM/PM TO \_\_\_\_\_ : \_\_\_\_\_ AM/PM

DATE: \_\_\_\_\_ FRIDAY \_\_\_\_\_ : \_\_\_\_\_ AM/PM TO \_\_\_\_\_ : \_\_\_\_\_ AM/PM

DATE: \_\_\_\_\_ SATURDAY \_\_\_\_\_ : \_\_\_\_\_ AM/PM TO \_\_\_\_\_ : \_\_\_\_\_ AM/PM

DATE: \_\_\_\_\_ SUNDAY \_\_\_\_\_ : \_\_\_\_\_ AM/PM TO \_\_\_\_\_ : \_\_\_\_\_ AM/PM

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

DO NOT WRITE BELOW THIS LINE

---

**TYPE OF ABSENCE:**

EXCUSED \_\_\_\_\_ UNEXCUSED \_\_\_\_\_

COMMENTS \_\_\_\_\_

Band Director's Signature \_\_\_\_\_ Date \_\_\_\_\_