



2021 ABSENTEE FORM

Association: Central Cascade Mead/Mt. Spokane North County Spokane Spokane Valley

Program: Football Cheer

Affecting: (Check all that apply)..... League Event Regional Event National Event

Other (explain): _____

Athlete's Last Name: _____ Athlete's First Name: _____

City, State, Zip Code: _____

Team Name: _____

Division:..... 2nd 4th 5th 6th 7th 8th

Date(s) of Non-Attendance: _____

Reason for Non-Participation: (Check one)

Medical (attach doctor's note)

School Related (attach teacher's note)

Family Obligation (explain): _____

Other (explain): _____

By our signatures below, we attest that the information provided herein is true and accurate to the fullest extent of our knowledge.

Parent/Guardian Signature: _____ Date: _____

Head Coach Signature: _____ Date: _____

Association Official Signature: _____ Date: _____

League Official Signature: _____ Date: _____

IMPORTANT MESSAGE FOR THE COACH: This original form and any attachments, if applicable, must be completed in full and placed in your book for each game the participant is not in attendance.