

## **Conflict Sheet**

Please use this form to list any known absence. This includes, but is not limited to, doctor's appointments, trips, other practices/rehearsals.

- All students are expected to participate in every performance.
- In the event of an illness or emergency, please notify Allan at 397-1695 or <a href="mailto:allan@imabrightkid.com">allan@imabrightkid.com</a> as soon as possible.
- Excessive absences or tardies may affect the cast member's role in the production.
- Absences after July 7th will not be allowed, unless under extreme circumstance or with prior approval.

Student's Name		
Last	First	Middle
will be late on the following date(s	s):	
Reason:		
will be leaving early on the followi	ng date(s):	
Reason:		
will be missing rehearsal on the fo	ollowing date(s):	
Reason:		
D (0   1   0		
Parent/Guardian Signature		
Phone Number	Date	