

**"Screaming Eagles" Marching Band
Schedule Conflict Form**

NAME _____ DATE _____

Section/Instrument _____ PHONE # _____

Date of Absence _____ EMAIL _____

Will you miss the entire event? YES NO

If NO, give the timeframe of your absence _____

Reason for absence _____

Please return this form to the director ASAP.

Please note: merely filling out this *form* does not excuse an absence. Approval must be secured prior to all missed events (except in the case of emergency).