



APPLICATION FOR WAIVER OF BONA FIDE TEAM RULE 45 (and 98)
(To be completed and submitted at least thirty (30) days prior to the event.)

SECTION I

1. Name of Student: _____
2. Grade: _____
3. Name of School: _____
4. School Telephone: _____
5. City/Town: _____
6. Zip: _____
7. Date Submitted: _____

SECTION II

1. Attach to this form a copy of the invitation received by the student.
2. How many days of school will the student miss? _____
3. How many practices/games will the student miss? _____
Games Practices
4. In what sport will the student be participating? _____
5. What sport will the student be missing by attending that event? _____
6. Date of the event. _____

SECTION III

Explain your request. By responding to the following points, please give an explanation of your support for the waiver.

1. The name of the event that the student will be attending. _____
2. Location of the event. _____

~ (continued)~

3. In what way is this event a significant experience?

4. Why is this request supported by the school?

5. Endorsement in support of the waiver. Your signature indicates your support of this waiver request:

Principal: _____

Athletic Director: _____

Coach: _____

Parent: _____

Student: _____