



EARLY RELEASE/LATE ARRIVAL

Gymnast's Name: _____ Gymnast's Level: _____

- Needs to be released from practice on _____ at _____.
(Date) (Time)
- Needs to arrive late for practice on _____. Approximate time of arrival will be _____.
(Date) (Time)

Reason for Early Release/Late Arrival _____

Parent's Name: _____

Parent's Signature: _____ Date: _____

Gymnast should give this form to his/her coach.



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