

Student Name: \_\_\_\_\_

Grade: \_\_\_\_\_

**AVON HIGH SCHOOL**  
PHYSICAL EDUCATION WAIVER FORM

PHYSICAL EDUCATION WAIVER:

Activity: \_\_\_\_\_

Season:  FALL     WINTER     SPRING    YEAR \_\_\_\_\_

REMINDERS:

- » Student must complete 2 full seasons of marching band, cheerleading, or high school athletics in order to be eligible for a PE waiver.
- » Student must get signatures listed below and submit this form to the Student Services office immediately following each season.

Incomplete forms will not be accepted.

REQUIRED SIGNATURES (MUST BE OBTAINED IN THE ORDER LISTED):

1. *Student:* \_\_\_\_\_
2. *Parent:* \_\_\_\_\_
3. *Head Coach:* \_\_\_\_\_  
**OR**  
*Athletic Director:* \_\_\_\_\_
4. *Band Director:* \_\_\_\_\_
5. *Counselor:* \_\_\_\_\_

**\*\*NOTE:** This form **must be submitted no later than one (1) week** following the conclusion of the sport season listed above.  
Forms submitted after this deadline will not be considered.

***Student Services Use Only***

SUBMITTED TO STUDENT SERVICES \_\_\_\_\_

CREDIT DETAIL UPDATED BY COUNSELOR ON \_\_\_\_\_