



CHORISTER ABSENCE REPORT

NAME _____ will be absent from

_____ on _____.
[Activity] [Activity Date]

For the following REASON (please check appropriate box):

- Personal Illness
- Illness of child, parent, or mate
- Death of child, parent, or mate
- Conflict with the CHORISTER'S principal occupation
- EMPLOYER (Arizona Opera) schedule changes with less than two weeks' notice.
- Other factors beyond the reasonable control of the chorister

(Describe): _____

Signature

Date