



SCHOOL MUSIC OBLIGATION FORM

CHECK ONE: GROUP I ___
 GROUP II ___

Please fill out completely and turn in BEFORE the conflict. You may make copies of this form or print additional forms at www.cyws.org.

Name _____

School _____

Name of school ensemble _____

Date, time, & location of conflict _____

Additional comments _____

(Signatures are required for absence to be excused.)

Student's signature _____ Date _____

Parent's signature _____ Date _____

School Music Director's Signature _____ Date _____

****NOTE TO SCHOOL MUSIC DIRECTOR****

The purpose of this form is to assist the CYWS in rehearsal planning and record-keeping. The CYWS requires its members to fulfill their school music obligations. **In the event of a direct conflict, students MUST participate in their school music function.** Students who do not meet this requirement lose their membership in the CYWS. If you have any questions or concerns, please feel free to contact Dr. Gary Ciepluch, Music Director at 216.368.2361.

Thank you for your continued support!!

****As a last resort, this form may be faxed to: 216.368.6557.
Must be received before the conflicting date.**