## KIDS Troupe Member Conflict Notification

Date submitted:

Notice provided By April 12th.

Approval signature (KIDS Producer)

Submit to tina.weiss@kidsfromwisconsin.org

Conflict Information					
Troupe Member Name:					
Is requesting to be Released from camp or tour (circle one) on:	(Date)	(time)	To:	(Date)	(time)
Please explain nature of the conflict, exact times (including travel to and from camp or tour location) the troupe member will be gone, how they will be transported to and from their conflict and any other information you feel we need to know:					
	j	Parent or Guardian Co	ntact Inforn	nation:	
Phone:			Mobile:		
E-mail address:					
Mailing address:					
Parent signature				Date	
Student Signature				Date	

Date