

Pleasant High School
PE Waiver Form

Name _____

Graduation Year _____

Activity _____

Coach/Advisor's Name _____

Activity Season/Year _____ (Ex. Fall, 2018)

Mark One: Waiver #1 _____ Waiver #2 _____

I understand and agree to the PE Waiver Guidelines set forth
by the Pleasant Local School District.

Student Signature _____

Date _____

Office Use Only:

Coach Verification

Name _____

Activity Completed _____

Guidance Verification _____