

# ALTERNATE PARTICIPATION FORM

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Choir: \_\_\_\_\_ Period: \_\_\_\_\_

**APF#: 1 2 3**

*(More than 3 result in a deduction in Daily Performance Points unless you have discussed a plan with Mr. Jackson.)*

Have you talked to Mr. Jackson?  Do you have a pencil?  Are you prepared to give feedback about what you are hearing?

Reason for alternate participation: (Please explain why you are not singing.)

*If you are sick, please be sure you are taking care of yourself. Drink plenty of fluids, carry cough drops with you so your throat does not become dry, and if you do not see improvement – please see your doctor. Your ensemble needs you, and we care about you!*

Is this the first time you have filled out an alternate participation form? \_\_\_\_\_

Please list the agenda for the day: (What are we doing? Why? What are your thoughts?)