

# LCSA Holiday Absence

**Skater name** \_\_\_\_\_

**Parent name** \_\_\_\_\_

**Date of application** \_\_\_\_\_

- Please note, the date of application must match the date form is sent to [LCSAabsences@gmail.com](mailto:LCSAabsences@gmail.com), If it does not match, the date of receipt of email will be used.

**Fee policy:**

- All training fees must be paid by direct debit prior to week commencing.
- Weekly fees are to be paid irrelevant of attendance unless holiday or injury fees apply or class cancelled by LCSA.
- Holiday fees (\$5 fee for holiday week) are able to be applied for under the following guidelines:
  - Must be applied for in writing, on this form, at least 2 weeks prior to the planned absence
  - Must be a full week absence. If the week does not run Monday-Sunday and overlaps two weeks of classes, LCSA will determine which week the discounted fees to which the holiday fees will be allocated.

Date of holiday period	Approved by LCSA
	<input type="checkbox"/>
	<input type="checkbox"/>

**LCSA use only:**

*Date form received:*

*Date form processed:*

*Date form emailed to Treasurer/applicant:*

*Notes:*

**Approved**

**Not approved**

- Form to be emailed to: [LCSAabsences@gmail.com](mailto:LCSAabsences@gmail.com)