



# NORTON HIGH SCHOOL GUIDANCE OFFICE

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Counselor

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Counselor

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Secretary

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## PHYSICAL EDUCATION EXEMPTION FORM

I, \_\_\_\_\_, will participate  
in \_\_\_\_\_ for the full season  
during the \_\_\_\_\_ school year. I understand that if for  
any reason I do **not** complete the full season, I will have to make up  
that physical education requirements by taking a physical education  
class, or completing another **full season** of marching band, athletics  
or cheerleading.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date