

Sports Team Attendance Form

Sport	Basketball	Flag Football	Softball	Volleyball
Team Name		Game Date		

First & Last Name	Employee ID #	Relationship (Select ONE)			Attended game?
		Employee	Spouse	Dependent	
		Employee	Spouse	Dependent	
		Employee	Spouse	Dependent	
		Employee	Spouse	Dependent	
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		Employee	Spouse	Dependent	
		Employee	Spouse	Dependent	
		Employee	Spouse	Dependent	

Clicking the "Email Form" button should open a new email message with the completed form attached as a PDF. If this does not occur when you click the "Email Form" button, please save the form to your computer, open a new email message, attach the completed form, and email it to employeeewellness@harrishealth.org.