



Program Withdrawal Form

Child Name: _____ Today's Date: _____

The Director and/or Assistant Director must be provided with written notice of intent to withdraw a child from any program. I understand that I am liable for tuition for the 30-day period from the date notice is given.

My child's last day of care will be ____/____/____

Reason for leaving: _____

Legal Guardian Printed Name Legal Guardian Signature Date

Update Director: _____ Update Teachers/Roster: _____ Update Accounting: _____
Staff/Date Staff/Date Staff/Date