

Change of Schedule Form

Family Name: _____ Date: _____

() **Please accept this as my two-week written notice of withdrawal.**

_____ will be leaving the program. As of
[Child(ren)'s Name(s)]

_____ my child(ren) will no longer be attending.
[Date of Withdrawal]

Reason:

I understand that I am responsible for all fees, current and past due, and that payments will be made before the last day my children are in attendance.

() **Please accept this as my two-week written notice of change in schedule.**

_____ 's schedule will be changing. As of
[Child(ren)'s Name(s)]

_____ my child(ren)'s schedule will be:
[Date of Schedule Change]

(NEW SCHEDULE)

Parent Signature

Date