



Withdrawal Form

Child's Name: _____ Classroom: _____

Date Form Completed: _____ Child's Last Date of Attendance: _____

Reason for Withdrawal: _____

Is your family interested in re-enrolling in the future? ☐ Yes ☐ No

If yes, when? _____

PARENT OR GUARDIAN ACKNOWLEDGMENTS REGARDING WITHDRAWAL

I understand that by withdrawing from FUMPer's, I am releasing all rights to my child's spot.

I understand that if my family wishes to re-enroll in the future, we will be placed on the wait list in the appropriate order. No preference will be given to us as a previously-enrolled family.

I understand that I am responsible for paying the assessed withdrawal fee, if required. I also understand that all withdrawals require at least two weeks' written notice, and if I have not provided sufficient notice, I may also be assessed an additional fee equal to two weeks' tuition.

Parent/Guardian Written Name

Signature of Parent/Guardian

Date

Office Use Only

Received By: _____ Date: _____

Child's Last Date of Attendance: _____

Two Weeks Written Notice Provided: ☐ Yes ☐ No

Withdrawal Fee Required: ☐ Yes ☐ No Amount: _____

Additional Fee Required: ☐ Yes ☐ No Amount: _____

Waitlist? ☐ Yes ☐ No Future Enrollment Time Frame: _____