



Withdraw Form

**-Important Note-**

This form must be completed and submitted in person at our office during business hours before the 1st of the month, to avoid being required to pay further tuition payments. If the form is not received before the 1st of the month, you will be responsible for tuition of the dropped classes, regardless of attendance for the coming months until the form is submitted.

Parent/Guardian Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Student Name: \_\_\_\_\_

Please withdraw the above named student from all enrolled classes as of \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Final Class Date

Reason for Withdraw:

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