



BOYS & GIRLS CLUBS
OF BELLEVUE

Great Futures Preschool WITHDRAWAL REQUEST

Please read and initial that you understand each of these items associated with withdrawal from the program:

_____ I understand that withdrawal is for the remainder of the school year. Withdrawal is not done on a month to month basis.

_____ I understand that I must give one month's notice (30 days) for withdrawal from the program.

_____ I understand that if my child's withdrawal date (last day of attendance) is between the 1st and the 15th of the month I will be required to pay half the tuition for the month.

_____ I understand that if my child's withdrawal date (last day of attendance) is between the 16th and end of the month I will be required to pay the entire tuition for the month.

Member Name: _____

Parent/Guardian Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ School: _____

Date of Withdrawal (last day of attendance): _____

Reason for Withdrawal: _____

Parent Signature: _____ Date: _____

Activity Director: _____ Date: _____

Area Director: _____ Date: _____