

WITHDRAWAL FORM

As stated in our policies and procedures, to discontinue any lesson, notice is due by the 15th of the previous month.

Lesson Day _____

Lesson Time _____

Type of Lesson _____

Teacher _____

Student Name _____

Parent Name _____

Phone Number _____

Address _____

Reason for withdrawing _____

Signature of Parent or Adult Student

Today's Date _____ Last Day of Lessons _____

Checks to be:

Mailed back

Date Mailed: _____

Picked-up

Name & Signature of person picking up:

Shredded
