

Notice of Withdrawal from the Y-Club Program

School Site: _____

Child's Name: _____

Parent's Name: _____

Contact Number: _____

Please cancel my child's enrollment from the Y-Club Program.

My child's last day of attendance will be: _____

My child was enrolled for the following: (Please check)

AM _____ PM _____ BOTH _____

M ___ T ___ W ___ TH ___ F _____

Check here if you want to withdraw all Early Release Days

Please let us know why you have chosen to withdraw from the program.

Schedule Change, no longer needed

Moving/changing schools

Laid off/Unemployment

Financial

Child rides the bus home now

Dissatisfaction

Other _____

Parent's Signature

Today's Date

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