

WITHDRAWAL TEMPLATE

(Parents may use this template to give notice when terminating child care services)

YOUR NAME
YOUR ADDRESS
DATE

PROGRAM LOCATION: _____

CHILD'S NAME: _____

STUDENT ID NUMBER: _____

(Submit completed template to the BASELP Site Coordinator)

In accordance with the Terms of Agreement, Item #7, I submit this notice as an indication of my intent to withdraw my child(ren) from the BASELP. The effective withdrawal date is:

Please initial:

- I understand that if this notice is being presented less than a two-week prior to withdrawal that I am responsible for the bi-weekly tuition payment. _____
- I understand that I am responsible for all outstanding tuition payments, late payment fees, and late pick-up charges. _____
- I agree to pay all outstanding payments, fees and/or charges due the BASELP. _____
- I understand that failure to pay outstanding balances may result with the account being submitted to a collection agency.
- I understand that a refund is only due if the total charge for services is less than what I have paid. _____

(Please note that it may take approximately 6 – 8 weeks for the refund to be mailed to you)

Parent/Guardian Signature

Date

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BASELP Office use:

Date received: _____

Date Acknowledged: _____

Received and processed by: _____