

Water Sprites Swim School
2280 Ivy Street, Suite 110
Chico, CA 95928
530-342-2999



Withdrawal Form

Parent's Name: _____

Child's Name: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Class Date & Time: _____

Date of last lesson student will attend: _____

Reason for withdrawal:

Payment Type:

- Automatic Debit
- Automatic Credit
- Cash/Check

I understand that my enrolment and monthly automatic debit will be cancelled 30 days after Water Sprites receives this written cancellation. Withdrawals are final. If I change my mind, I must re-enroll.

Signature of Participant or Parent/Guardian

Date

Office Use Only

Date received: _____

Date of last draft: _____

Approved by: _____