Withdraw Form

-Important Note-
This form must be completed and submitted to our office during business hours by the 28th of the month to avoid being required to pay further tuition payments. If the form is not received by the 28th of the month, you will be responsible for tuition of the dropped classes, regardless of attendance for the coming months until the form is submitted.
This policy does not apply to Company dancers. Please see Company Contract

Parent/Guardian Name: _____ Phone: _____

Student Name: _____

Please withdraw the above named student from all enrolled classes as of ___/___/___

FINAL CLASS DATE

WITHDRAW WILL OCCUR ON THE FIRST OF THE COMING MONTH

Parent/Guardian Signature: _____

QUESTIONNAIRE

Please take a moment to answer a few questions for us.
Your answers will help us resolve any issues we may have had or make necessary changes to improve the overall experience at Premiere Dance Center. Thank you!

Please give details for the reason for your withdrawal:

_____

_____

How can we make improvements?

_____

_____

Would you recommend us to a friend?
☐ Yes ☐ No

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