

Withdraw From Care Form

Date	_	
	nan one child per fam	r notice of withdrawal from Kids@ Churchill Park. One nily is withdrawing. Once completed, please return to
As described in the Financial Agreer	nent, one full month	's notice is required or fees paid in lieu of notice. This
date will coincide with the end of a n		· ·
	rents who receive sul	ny outstanding amounts and refunds will be processed bsidy, parent account balances will be held for 60 days 60 day period (if applicable).
I,Parent Name	, will be with	ndrawing my child, from Kids@ Churchill Park Child
Care effective	·	
Date		
Child's Name		Date of Birth
Kids@ Churchill Park Program (please	e choose one):	
☐ Parkside Child Care		☐ PlayPenn Child Care
Bright Lights Child Care		Pump-Kin Patch Child Care
Connaught Out of School Car	re	Sunridge Child Care
Kahanoff Child Care		
Please return any access cards, include care and remember to retrieve your		rogram Director prior to leaving on your last day of
•	•	Parent Initial:
If you no longer want to receive Kids	@Churchill Park com	munications, please unsubscribe from our mailing list.
		Parent Initial:
,	•	d care needs. We value all of our families and wish you ces with Kids@ Churchill Park on Google.
Parent Signature		Date
Witness		Date
Office Hee Only		
Office Use Only Date received	Date e	ntered into Timesavr
Account information		
Kids@ Churchill Park Representative		
Name (print)	Signature	Date