



# PLAYSCHOOL CHILD CARE INC.

*\*\*A two week (10 business days) notice is required on all schedule changes/withdrawal notices unless previously arranged.*

## Change In Schedule Request

Child's Name: \_\_\_\_\_

Current Date: \_\_\_\_\_ Desired Date for Schedule Change: \_\_\_\_\_

My Child's current schedule: *(Please include days and times your child currently attends)*

Monday	Tuesday	Wednesday	Thursday	Friday

**Desired Schedule:** *(Please include days and times you would like your child to attend)*  
*Explorer Club is a 3 day Minimum and Playschool's Child Care is Full Time.*

Monday	Tuesday	Wednesday	Thursday	Friday

## Withdrawal Notice

Child's Name: \_\_\_\_\_

Current Date: \_\_\_\_\_ Desired End Date: \_\_\_\_\_

Reason for withdrawal: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

*I understand and agree that I must give a two week (10 business days) notice or I am responsible for full payment.*

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Program Director Signature

\_\_\_\_\_  
Date