



Withdrawal Card

Child's Name: _____

Home Phone Number: _____

Class Level: _____ Day / Time: _____

Ending Date: _____

- I understand that this card should be submitted before the end of my child's last month of classes.
- I understand that if my child attends classes within any given month, tuition is due for the entire month.
- I understand that Gold Star does not pro-rate tuition for students who withdraw mid-month.
- I understand that my child cannot attend Make-Up Classes once he or she has been withdrawn from classes.

Parent or Guardian's Signature: _____

Today's Date: _____

Office Use Only

Main Book:	_____	Special	_____
Roll Book:	_____	Instructions:	_____
Computer:	_____		_____
Auto Pay:	_____		_____