

Malmo Pre-Kindergarten Withdrawal Form

Child's Name: _____

Class (circle): 2-day 3-day 5-day

I _____ am withdrawing _____
Name of parent/guardian Name of student

from Malmo Pre-Kindergarten. My child's last day will be _____.

Reason: _____

NOTE: One full month's written notice is required for any withdrawal. Failure to provide required notice will result in forfeiture of the following month's fees.

Signature of Parent/Guardian _____

Date _____

Submit form to Registrar by email: registrar@malmopreschool.com

FOR OFFICE USE ONLY	
Received by:	_____ <small style="margin-left: 100px;">Print Board member's name</small>
Board Member Signature:	_____
Date received:	_____