



Withdrawal Form

To officially withdraw from MercyOne Child Development Center, families must complete this form and return to the director.

Name of child/children you are withdrawing: _____

Names of Parents: _____

If moving what is your new address: _____

Last Date Of Attendance: _____

Reason for Withdrawal: _____

In order for MercyOne Child Development Center to better serve families in the future; please note any suggestions or comments below.

Please initial the statements below indicating your acknowledgement.

_____ I give permission to release past and present academic records, immunization records, physical exam records, and special education records and any other information that may be useful.

_____ I authorize MercyOne Child Development Center to withdrawal the above-named child/children from further care and accept full responsibility for any outstanding financial obligations (such as childcare fees, including any minimum charges that apply, activity fees, late charges, etc.) I understand there are no refunds either partial or complete for the annual enrollment fee or any remaining balance left on the account.

Parent Signature

Date

Office use only:

- | | | | |
|------------------------------------------|-----------------------------------------------|------------------------------------------------|------------------------------------------|
| <input type="checkbox"/> Put on Calendar | <input type="checkbox"/> Remove Schedule | <input type="checkbox"/> Remove on Meal Sheets | <input type="checkbox"/> Pull Folder |
| <input type="checkbox"/> Email Staff | <input type="checkbox"/> Withdraw Child | <input type="checkbox"/> Pull Immunizations | <input type="checkbox"/> File Old Folder |
| <input type="checkbox"/> Remove Billing | <input type="checkbox"/> Hide Procure Account | <input type="checkbox"/> Pull CACFP Form | |