

Change/Withdraw Form for Before and After Care*

Child's Name:		Child's Class:			
Parent's Name:		Date:			
Change in Service	2				
My Child is curre	ntly enrolled in:	(Please Circle)			
Monday	Tuesday	Wednesday	Thursday	Friday	
AM	AM	AM	AM	AM	
PM	PM	PM	PM	PM	
I would like to change my child's enrollment to the following: (Please Circle)					
Monday	Tuesday	Wednesday	Thursday	Friday	
AM	AM	AM	AM	AM	
PM	PM	PM	PM	PM	
Complete Withdraw I would like to permanently withdraw my child from (circle one):					
Before Care	After Care	Date care will no longer be needed:			
Signature of Parent:					
Signature of Playt	tots Director:				

^{*} Please remember that we require two weeks notice to process changes in service and 48 hours notice for a drop-in.