



AQUATECH
SWIM SCHOOL

30 Day Withdrawal Notice

Are you sure you are ready to leave? If so, the office will apply an end date to your account 30 days from the date we receive this notice. Please be as thorough as possible when filling out the form as your feedback is greatly appreciated.

Child # 1 First Name: _____ Last Name: _____

Level: _____ Day/Time: _____ End Date: _____

Child # 2 First Name: _____ Last Name: _____

Level: _____ Day/Time: _____ End Date: _____

Child # 3 First Name: _____ Last Name: _____

Level: _____ Day/Time: _____ End Date: _____

Reason For Withdrawal: _____

Quality Assurance:

Please rate the following areas on a scale of 1 to 10 in term of your experience while taking lessons with us. 1=Poor 10=Excellent

Customer Service: _____ Deck Staff: _____ Instructors: _____ Policies: _____ Facility: _____

Feedback: _____

Guardian Signature: _____ Date: _____

AT STAFF: _____ Date: _____