



Account Hold/Withdrawal Form

This will serve as my two-week notice* that I, _____, parent/guardian of,
_____, would like to (complete an option below):

Place my child/children's account(s) ON HOLD, from _____ through _____,
due to _____.

They will return to the After-School service on _____.

OR

WITHDRAW my child/children from the After-School service, due to _____

_____.
Their last month of care will be _____. My forwarding address is (if
applicable): _____.

Parent/Guardian Signature: _____ Date: _____

Staff Signature: _____ Date: _____

Finance Approval: _____ Date: _____

*The two-week notice begins the day BGCPPR receives this form. Your account(s) will not be charged for the month(s) specified above, however, if your child/children attend the Club at any time during the month(s) indicated above, the charge(s) will be reinstated, and payment will be due immediately.