Date: _____

Ι	_ (print parent name) will be withdr	awing my child/children
	(print child/children's nam	ne) from Play Datez Child
		(date). Please accept this
	withdrawal of my child/children as	required by my Parent & Provider
Contract Agreement.		
Reason(s) for leaving:		
o Moving		
o Child aging out		
o Challenging Behavior		
o Rates are too high		
o Policy Issues		
o Change in child care needs		
o Other (please explain):		
me? o Yes o No, why not:	ter and continue growing, please ar	nswer the following: Would you refer
Would you use me again? o Yes	o No, why not:	
Comments or suggestions:		
Parent Signature:	Date:	
Provider Signature:	Date:	
I have received ALL personal be	longings Date	