

# *Middleburg Academy of Dance*

4293 CR 218W, Unit 108, Middleburg, FL 32068  
904-240-9556

## Notification of Withdrawal

STUDENT NAME: \_\_\_\_\_

PARENT NAME: \_\_\_\_\_

CLASSES: \_\_\_\_\_

**I understand that this notice must be received 30 days PRIOR to the date of withdrawal.**

**Reason for leaving:** Did Not Like Class      Summer Withdrawal      Trying Something New  
Changing Studios      Schedule Conflict      Moving

Please rate us on a scale of 1-5, with 5 being the best possible score. Please circle a number.

Customer Service	1	2	3	4	5
Quality of Classes	1	2	3	4	5
Availability of Times of Classes	1	2	3	4	5
Professionalism of Staff	1	2	3	4	5
Cleanliness of Facility	1	2	3	4	5

To better serve you, please let us know if there is something we can do to make the studio more enjoyable. Your satisfaction is important to us! Thank you for your time!

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Parent signature: \_\_\_\_\_ Today's Date: \_\_\_\_\_

I will be withdrawing my child effective the **MONTH** of: \_\_\_\_\_

### **FOR OFFICE USE ONLY**

Received by: \_\_\_\_\_ Date: \_\_\_\_\_

Dat/Time of Last Class(es): \_\_\_\_\_ Registration pulled: \_\_\_\_\_

Autopay form pulled: \_\_\_\_\_