



SWIM LESSON WITHDRAWAL FORM

Parent's name: _____ Student's name: _____

Lesson day/time: _____ Last day of class: _____

Reason for withdrawal: _____

Comment: _____

I understand that my lessons will cease 30 days from now which must be at the end of a month when the completed withdrawal form is received by Diventures staff. ***There will be a re-registration fee should we enroll at a future date.***

Signature: _____ Date: _____

For office use only.

Entered by: _____ Date received: _____