

Withdrawal Agreement

This must be handed to either Coach David or a Board member. Do not leave this in the payment box or in a file.

As of _____, 20____ my child(ren) _____
Effective date swimmers name(s)
will no longer be swimming with Storm Aquatics.

I understand that if this withdrawal agreement is received prior to the 20th of the month I will not be charged the next months fees. If this is received on or after the 20th of the month then I am responsible for the next month's fees.

I also understand that I am required to make my account current including all fundraising obligations which will be prorated at either \$30 a month, individual or \$50 a month, family plus all meet fees.

Parents Signature

Date

Date received: _____

Board Member: _____

