



DROP NOTICE

Child's Name: _____ Class: _____ Day/Time: _____

Child's Name: _____ Class: _____ Day/Time: _____

Child's Name: _____ Class: _____ Day/Time: _____

Child's Name: _____ Class: _____ Day/Time: _____

Parent Name: _____

Reason for Dropping: _____

IMPORTANT:

Cancellation of REFLEX The Pearland Gymnastics Academy membership requires a written or emailed notice to be turned into the front desk of REFLEX The Pearland Gymnastics Academy.

Below is the statement from the REFLEX The Pearland Gymnastics Academy enrollment paperwork that you (parent/guardian) have signed upon registration of your child(ren) into classes at REFLEX The Pearland Gymnastics Academy.

*I understand that a **30-DAY WRITTEN NOTICE** is required to drop from a class. I also understand that the notice must be received 30 days prior to the month dropping. I understand that I am responsible for tuition for the month the notice was not given. Notices received after 30-day window will be processed and will take affect the following month.*

This Form must be received 30 days BEFORE the 1st day of the month dropping!

(Office Use Only)

DATE OF LAST CLASS: _____ **TUITION THAT IS DUE:** _____

Parent Signature: _____ Date: _____

(Should your child change their mind, they are welcome to return anytime!)