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|  **TRUE WAY PRESBYTERIAN KINDERGARTEN** |
|  **156-B STIRLING ROAD** |
|  **SINGAPORE 148947** |
|  **TEL : 6471 0781** |
|  |  |
|  **WITHDRAWAL FORM**To: The PrincipalI, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(IC no \_\_\_\_\_\_\_\_\_\_\_) parent of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (class\_\_\_\_\_\_\_\_\_\_) would like to withdraw him/her from True Way Presbyterian Kindergarten. His/Her last day will be on \_\_\_\_\_\_\_\_\_\_\_\_\_\_. |
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Reason for withdrawal: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tick where appropriate:-

□ I understand that the deposit of $100 will be forfeited as I did not give the required one month’s notice.

□ I understand that the deposit of $100 will be refunded to me as I have

given the required one month’s notice. The cheque is to be made in favour of

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Date and Signature of Parent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_