



Carrollton Academy of Dance
home of Parker Dance Company

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Carrollton, GA 30117
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www.carrolltonacademyofdance.com

Withdrawal Form - Term: AUGUST 10, 2019 - JUNE 10, 2020

- Please fill out the following information below when choosing to withdraw from ALL classes dancer is currently enrolled. After form is completed in full, please hand deliver, scan and email to carrolltonad@gmail.com, or mail (with tracking) to 106 Folds Drive, Carrollton, GA 30117. Withdrawal fee is \$55 for dancer’s enrolled in less than 3 hours of class per week or 1/2 of one full month’s tuition rate for accounts in which the dancer is enrolled in 3 or more hours per week. If a check or money order is not received with the Withdrawal Form the full withdrawal amount will be posted and charged to the card on file for the account holder.
- Withdrawal from classes does not include refunds of any kind for any monies paid. This includes but is not limited too tuition, registration fees, costume fees, and/or performance fees. Withdrawal forms must be received before the first of the month to avoid responsibility of any charges for the month following withdrawal. Accounts in which the Withdrawal Form is not received before the first of the month will be charged for the full month of tuition and any charges due within the same month. Account holder is also responsible for any past due balances at time of withdrawal.

Student’s Name: _____

Account Holder’s Name: _____

Account Holder’s Email Address: _____

Reason for withdrawal: _____

I have read and understand that a withdrawal from all classes does require a \$55 withdrawal fee OR 1/2 of one full month’s tuition if my dancer is enrolled in 3 or more hours per week. I understand that if I wish to re-enroll my dancer before the start of the new term in August of 2020; I will be charged a registration fee regardless of having already paid a registration fee for the 2019-2020 term to cover clerical expenses. I understand that any outstanding balance plus a withdrawal fee must be paid in full at the time of withdrawal. I understand that it is my responsibility to bring my account to a zero balance, including my withdrawal fee, to avoid further collections - i.e. collection agency, legal action.

Account Holder’s Signature:

_____ Date: ____/____/____