

# 2018-19 SCHEDULE CHANGE FORM

Use this form to ADD, DROP or TRANSFER classes and/or to UPDATE or CANCEL your automatic billing

Student's Name: \_\_\_\_\_

Class Type	Day/Time	Teacher	Action
_____	_____	_____	ADD / DROP
_____	_____	_____	ADD / DROP
_____	_____	_____	ADD / DROP
_____	_____	_____	ADD / DROP
_____	_____	_____	ADD / DROP

## 1. Please complete this section if you are changing your child's schedule

\_\_\_\_\_ This change does NOT effect my child's monthly tuition

\_\_\_\_\_ This change DOES effect my child's monthly tuition \*

\* Must submit revised Automatic Billing Authorization to change your payment amount

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

## 2. Please complete this section if you are withdrawing from Shooting Stars and cancelling your automatic billing authorization

I wish to withdrawal my child from the classes listed above and cancel my automatic payment authorization for the monthly tuition associated with this class.

Our last day of classes will be \_\_\_\_\_

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

I, \_\_\_\_\_, wish to cancel automatic payment for my child, \_\_\_\_\_'s

class tuition. I understand this will remove my child from any and all classes they attend at Shooting Stars.

I understand if they wish to enroll again this calendar year re-enrollment fees may be assessed.

Please remember these Dance Program Policies:

\* Your schedule change and/or cancellation needs to be submitted in writing, on this form and received by a Shooting Stars desk employee or manager, signed and dated by the 15th of the month in order to process your request before the next billing cycle scheduled on the 28th of the month.

\* If you wish to re-enroll in any class during the course of the same Academic Year, your account may be subject to a registration fee.

If you would care to share your reason for withdrawing from our program, we'd like to know so we may use this information to make improvements in the future. Thank you and we hope to see you again!

Customer comments:

Office use only

Received By: \_\_\_\_\_

Date: \_\_\_\_\_

Processed in MB: \_\_\_\_\_