



Withdrawal Form

~ Important Note ~

This form must be completed and turned in to our office by the 1st of the month to avoid being required to pay further tuition payments. The Primary Contact is responsible for tuition and late fees until a Withdrawal Form is turned in to the Allthatjazz Dance Centre's office, regardless of attendance.

Student Name: _____

Primary Contact Name: _____

Please withdraw the above named from all enrolled classes as of _____ / _____ / _____
Final Class Date

Primary Contact Signature: _____

Questionnaire

Please take a moment to answer a few questions for us. Your answers may help us resolve any issues we may have had or make necessary changes to improve the overall experience at Allthatjazz Dance Centre. Thanks!!!!

Why are you withdrawing?

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> Moving out of area | <input type="checkbox"/> Student lost interest | <input type="checkbox"/> Scheduling conflict | <input type="checkbox"/> Unhappy with experience |
| <input type="checkbox"/> Changing studios | <input type="checkbox"/> Disliked class | <input type="checkbox"/> Disliked teacher | <input type="checkbox"/> Other |

Please give details of the above reason.

How can we make improvements?

Would you come back to Allthatjazz Dance Centre in the future?

- Yes No

Would you recommend us to a friend?

- Yes No

Staff Signature: _____

Date _____ / _____ / _____