



CLASS CHANGE FORM

Parent or Guardian Name _____ Phone _____

Student Name _____ Date: _____

Please fill out which statement best applies to you....

****Add class(es)** _____

****Transfer class from** _____ **to** _____

****Drop class(es)** _____

****Cancel all classes** _____

****30 day written notice for drops, transfers and cancellations are required or next full monthly tuition will be due. The first month's tuition for the added class will be due with this form. The Pro-rated amount to add a class during the middle of the month will be due with this form. Please refer to your handbook. There is a \$20 admin fee for transfers due with this form.***

****Adult Student or Parent Signature

_____ Date _____