

All American Gymnastics

Student Withdrawal Form

*Note: A written and paid 2 week notice must be given before discounting classes.

| | | |
|---------------------|------------|--------------|
| STUDENT'S LAST NAME | FIRST NAME | TODAY'S DATE |
|---------------------|------------|--------------|

| | | |
|---------------------|------------|--------------------|
| STUDENT'S LAST NAME | FIRST NAME | DATE OF LAST CLASS |
|---------------------|------------|--------------------|

| | | |
|--------------------|------------|-------|
| PARENT'S LAST NAME | FIRST NAME | EMAIL |
|--------------------|------------|-------|

| | |
|--|--------------|
| CLASS NAME: | COACH: _____ |
| CLASS DAY(S) (PLEASE CIRCLE): MON TUES WED THURS FRI SAT | |
| TIME(S): _____ | |

| | |
|--|--------------|
| CLASS NAME: | COACH: _____ |
| CLASS DAY(S) (PLEASE CIRCLE): MON TUES WED THURS FRI SAT | |
| TIME(S): _____ | |

| |
|----------------------------|
| REASON FOR TAKING A BREAK? |
| _____ |
| _____ |

| | | |
|---------------------------------------|-----------------------------|-----------------------------|
| SATISFACTION: 1 = POOR; 5 = EXCELLENT | | |
| CURRENT COACH: 1 2 3 4 5 | CHILD'S PROGRESS: 1 2 3 4 5 | CUSTOMER SERVICE: 1 2 3 4 5 |

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|---|
| WE ARE SORRY TO SEE YOU GO! Any suggestions on how we could improve your All American experience? |
| _____ |
| _____ |

Parent Signature

Date

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Updated 12/2016

