



9035 Shady Grove Court  
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**Request for Withdrawal**

*Please return completed and signed form via fax to 301-424-9477.*

Date of Request: \_\_\_\_\_ Date of Withdrawal: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Is this an address change? \_\_\_Yes \_\_\_No

Child(ren) to be Withdrawn: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of Center:

- Charles Drew (CD)                       Galway (GW)
- Cold Spring (CS)                       Stone Mill (SM)
- Dufief (DF)

**Refund Information (if applicable):**

- Security Deposits apply to Infant – Pre-K programs. To be eligible for a security deposit refund, your Infant-Pre-K child must attend the new program for at least one (1) month and a one (1) month written notice of withdrawal must be submitted to Academy’s Main Office.
- Students enrolled in any of Academy’s school year programs are based on annual school year tuition and are divided into ten (10) equal, ***non-refundable*** monthly installments. This applies to the following programs: All Before & After School-Age programs, Academy Primary School (K-2<sup>nd</sup>), B’nai Israel Aftercare, and MSDE Preschool-Prekindergarten school year programs.
- All financial obligations to Academy must be cleared prior to the issuance of a refund. Any refund due may be used towards any outstanding obligations.
- Refund checks will be mailed 6 weeks after withdrawal.
- Academy requires one month’s (30 days) written notice of withdrawal in order for them not to be charged for all of the following month. **For example: if we are notified Feb 1<sup>st</sup> that Feb 28<sup>th</sup> is the last day, the following month will not be charged.**

**What is your primary reason for withdrawing?**

- Moving to another school district or out of state.
- My child will be entering kindergarten.
- Center operating hours.
- Center Location
- No longer need licensed, regulated child care.
- Enrolling my child in another child care program.

If you checked yes, please write a brief explanation:

\_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_