

## DROP REQUEST FORM

Family Information / Parent / Guard	dian / Billing Contact	
Guardian's Full Name:		
Participant Information		
1st Participant Name:	Class Name	Drop Date
2nd Participant Name:	Class Name	Drop Date
3rd Participant Name:	Class Name	Drop Date
Please select one:		
Yes we plan to continue in the futu	ıre	
Unsure of continuing in the future		
No plans to continue in the future		
<b>Reason for withdrawing class:</b> We a can do to provide a better service to you. All feedback is	re constantly striving to create the best customer experies appreciated.	ence. Please let us know if there is anything we

Signature: \_

Date

I understand that once this document is submitted to Integrity Athletics I will forfeit my child's spot in their current class. All drop forms should be received no later than end of business on the 24th of the month prior to drop. Any drop requests submitted between the 25th and the 1st must communicate with the billing department (billing@integritygym.com) and are subject to approval. Drops made after payments have been processed will be responsible for 50% of that months tuition and the remaining will be a credit not a refund. If you drop a class mid-month you will not receive credits and/or refunds for the remaining classes in the current month. You may complete the remaining classes in the current month if you wish.

You may submit your completed form using one of the following methods:

- Drop the form off to an Integrity Front Desk staff member
- Email the form to billing@integritygym.com
- Drop online through the Integrity parent portal

## For Office Use Only:

Received Date\_\_\_\_\_Initial\_\_\_\_\_

Approved Date\_\_\_\_\_Initial\_\_\_\_