This is a fillable form, you may either fill it out online and email it to schedule@harmoniccore.com or you may hand it in at the center.



Withdrawal Form

Child's Name:		_
Last date child will attend Co	ore Learning Center: Parent	
Name(s):		
Current Address:		
If moving, new address:		
Reason for leaving the Core	Learning Center:	
What things did you like abo	ut the Center what did we do well?	
What could have been done	to better serve you and your child?	
Any other comments you have	ve would be welcomed.	
Parent/Guard	lian Signature	Date