

Parents,

Please download, print and bring or email to the school's office.

_____ (child's name) will be withdrawn from Lakeside
Montessori School effective _____.

I acknowledge that by withdrawing my child from Lakeside Montessori my
Registration Fee is forfeited and the current contract is cancelled.

To re-enroll, I acknowledge that I will go through the enrollment process
again, paying the Registration Fee and current tuition.

Parent's signature

Current date