

Contract Amendment Notice

This notice serves to indicate contract amendment for

Child's Name: _____

Please circle one of the following:

- A. I wish subtract days from my child's current schedule.
- B. I plan to withdraw my child from the program.

A. If subtracting days please circle the days you would like to attend:

Monday Tuesday Wednesday Thursday Friday

When would you like this new schedule to go into effect?*

B. If withdrawing from the program please indicate the last day of attendance:*

Reason for Amendment (i.e. work schedule, moving, Kindergarten, etc.)

****Reminder***

Per LMACCC contract families are required to complete a written termination notice as follows:

30 days in advance for the period between September 16 and May 14

45 days in advance for the period between May 15 and June 30

60 days in advance for the period between July 1 and September 15

Parent Signature: _____

Date: _____

Administration only:

Date received: _____

Administrator: _____