

WITHDRAWAL NOTICE

Date: _____

The Principal
Konohana Kindergarten

Dear Sir/Mdm

Re: (Child's Name) _____

I would like to inform you that I would be withdrawing my child from the kindergarten for the following reason/s:

His/Her Last day will be _____

I understand that the School Fees Deposit will be returned to me with one month's written notice and upon settling all outstanding payments with Konohana Kindergarten

Following please find our permanent address in our home country:

Yours sincerely,

(Signature & Name of Parent)

For Official Use	
Refund	
Deposit	\$1,450.00
Building Fund (incl. GST)	
Student Master List	