

Youth Development Centers Program Cancellation Form

Family Information		
Child's Name		
Parent's Name		Phone
Termination Notice (*30 day notice r	equired for regular programming,**	1 week notice required for daily or weekly camps)
My child(ren)'s last day of care at the	YDC will be	,20
I understand that I am responsible fo	r tuition for 30 days from the	date written notice is given for regular programming.
I agree that I am responsible for payr	nent if notice is not received o	one week prior to the camp start date.
I agree that if a security deposit was	paid (full time programming or	nly) the security deposit will be applied to my child's last month of
care provided I have submitted a 30 d	ay notice in writing.	
Parent's Signature	Da	ate
Program Leaving (Check All Tha	it Apply)	
*YDC Infant Toddler Preschool	* Before/After School	**Adventure Camp (1 week notice required)
*YDCN Infant Toddler Preschool	* Y Explorers	**Camp Nakota Day Camp (1 week notice required)
*YDC Mandan Preschool	*Part Time Early Learning A	**Part Time Kinder Camp (1week notice required)
Reason for Leaving		
In a continual effort to improve our pr	ogram, we ask that you sha	are your reason for choosing to leave the YDC.
For Office Use Only		
Program Director Initial		Email CACFP Coordinator
YDC Director Initial		Email Teacher
Operation Director Initial		Set up withdraw date in Procare
Comments:		Scan Termination Document to Billing
		Archive Child's File