



YMCA of Regina Before & After School Program
Change in Registration/Withdrawal Form

Child's Name(s): _____

School Attending: _____

Current Registration status: ☐ AM ☐ PM ☐ Full-Time

CHANGE Registration status to: ☐ AM ☐ PM ☐ Full-Time ☐ Withdraw

Effective: _____

Reason(s): *(please check all that apply)*

☐ Moving ☐ Scheduling conflict ☐ Personal reasons ☐ Value of fees
☐ Other childcare ☐ Child is old enough to stay home ☐ Other *(please specify below)*

I would like to sign up for the After-School Snack: _____

List any allergies: _____

I would like to withdraw from the After-School Snack: _____

Comments: _____

This is 30 days written notice to change my status or to withdraw.

Parent's Name: _____

Parent's Signature: _____

Date: _____ Email: _____

(all confirmations will be emailed)

FOR OFFICE USE ONLY

Date Received: _____

Initials: _____

Date Confirmed: _____

Initials: _____