



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

F.M. KIRBY CHILDREN'S CENTER CHANGE OF SERVICE FORM

****Please note: Two weeks notice is required for all changes in days and withdrawals. Therefore, billing changes/termination of fees will take effect two weeks from the date of notice.**

Changes are expected to be in effect for a duration of at least four weeks.

Today's Date: _____

Child's Name: _____

Current Classroom: _____

Days Currently Enrolled: _____

New desired schedule:

Last day of Old Schedule: _____

First day of New Schedule: _____

Monday Tuesday Wednesday

Thursday Friday

Other notes: _____

Withdrawal from Kirby:

Withdrawal Date: _____

Reason for withdrawal: _____

Parent Signature: _____

Office Use only:

Change of Service EZ Care Bus Schedule

Active Net Enrollment Spreadsheet

If Leaving:

Pull folder Remove from Licensing & Classroom Spreadsheets