

# Withdrawal Form

LoMastro Performing Arts Academy  
840 S. Waukegan Road  
Lake Forest, IL 60045

Please complete the following information	
Parent/Guardian's Name (print)	Student's Name (print)
Parent/Guardian's Signature	Today's Date
Class/Day/Time	
<b>Reason for Withdrawal</b> Please take a moment to answer a few questions for us. Your feedback may help us to improve the overall experience at LoMastro Performing Arts Academy. Thank you!	
1) Why are you withdrawing (please check all that apply)?	
<input type="checkbox"/> Moving out of the area <input type="checkbox"/> Student lost interest <input type="checkbox"/> Scheduling conflict	
<input type="checkbox"/> Changing studios <input type="checkbox"/> Dislikes class <input type="checkbox"/> Dislikes teacher	
<input type="checkbox"/> Unhappy with experience <input type="checkbox"/> Medical reasons <input type="checkbox"/> Other (please explain)	
Please explain _____ _____	
2) Would you enroll in another class at LoMastro in the future or recommend us to a friend? Please explain _____ _____	
<b>Tuition is non-refundable.</b> Withdrawals received at least 10 business days prior to the class start date will receive a credit for future classes (a withdrawal form must be completed). A credit of tuition for medical reasons will be considered only when accompanied by a letter from a physician.	
All withdrawals are processed within 2 weeks of the date received.	
Please return the completed form to the academy during open hours or by mail. Mail to: LPAA, 840 S. Waukegan Rd. #108, Lake Forest, IL 60045	

For Office use only	
Date received:	<input type="checkbox"/> Class transfer
Notes:	<input type="checkbox"/> Credit on account
	<input type="checkbox"/> Other _____
Staff Signature:	