6.6 Notification of Leaving Form

Sandbach Heath (St. John's) Playgroup: Notification of Leaving Form

School Lane Sandbach Heath Sandbach Cheshire CW11 2LS	
Telephone number: 01270 761505	
Email address: sandbachheathplaygroup@btc	onnect.com
Registered Charity No 1021342	
Registered OFSTED No. 305284	
You are required to provide us with at least on	e month's notice of withdrawing your child. If insufficient notice is
given you will be responsible for the full fees for	r your child for one month from the date of notice. Please refer
to our terms and conditions for full details.	
A final invoice will be issued reflecting the fees	chargeable for the remaining period that your child attends -
together with any previously invoiced amounts	which remain outstanding.
I confirm that _	(insert child's name) will be leaving
[insert name of provider] on	(insert date) and hereby give the
required one month's notice period.	
Name of parent/guardian	
Signed	Date
Because we are always seeking to develop an the questions below. All feedback is treated co	d improve our services we would be grateful for a response to nfidentially and is greatly valued.
How long has your child attended our setting	g? Years Months
2. Which age group does your child attend?	2-3's / 3-5's
3. Why is your child leaving?	Cost Starting school Attending another setting
	Other
4. How would you rate the standard of care an education your child has received?	d Very good Good Satisfactory Poor