

Fisher Early Learning Center at The University of Denver
1899 East Evans Avenue, Denver, Colorado 80208
Phone: 303-871-2723 * Fax: 303-871-7805
www.du.edu/fisher

Departure Notification

Child's Name: _____
(Please Print)

Classroom: _____
(Please Print)

Child's Schedule: (Please Circle)

M-F

M-W-F

T-H

Parent/ Guardian: _____
(Please Print)

Phone: _____
(Please Print)

Departure Date: _____

Do you have other children continuing at Fisher? (Please Circle)

Y

N

Forwarding Address: _____
(If Applicable) City State Zip

Access Cardholder Names: _____

I understand that I must provide the Fisher Early Learning Center with a 30 day written notification of withdrawal. I understand that I am financially responsible for all unpaid charges on my child's account. Any questions about billing should be directed to the Finance Manager.

Parent / Guardian – Signature

Date

Office Use Only – Please Initial

Director: _____

Master Teacher: _____

Enrollment Coordinator: _____

Finance Manager: _____

