

Portneuf Valley Swim Team
144 Wilson Ave, Pocatello, ID 83201
portneufvalleyswimteam@gmail.com

*****If you wish to withdrawal you or your swimmer from the program you must fill out a 14-day unenrollment notice form by the 15th of the current month. Otherwise you will be charged for the following month. *****

Example:

If you wish to not swim in May, you must fill out the disenrollment form no later than April 15th.

I, _____, hereby give notice of withdrawal from Portneuf Valley Swim Team.

Name on account: _____
(if different than above)

All fees and fundraising commitments must be met before a withdrawal will be processed. **Any withdrawal forms received after the 15th of the current month will be billed for the next month before payments are stopped.**

NO EXCEPTIONS. NO REFUNDS. NO PRORATION.

Participant to Unenroll: (check level)

1.) _____

2.) _____

_____/_____/_____
Signature: Parent/Guardian Name Today's Date

Month to Unenroll: _____

_____/_____/_____
Business Manager Initials Date Received