



# Kids Kingdom Sports Center

## Home of Euro Stars Gymnastics

### Drop Request Form

OFFICE USE ONLY:

Date Received: \_\_\_\_\_

Received By: \_\_\_\_\_

All drop slip requests must be submitted on or before the last 7 days of the month **PRIOR** to the student's next month class(s). No verbal, email or fax authorizations of any kind will be accepted. Anyone wishing to fill out a drop slip form must submit it to our main office by the deadline provided above.

**Please indicate you understand and agree with the following:**

- ☐ I request that my student be dropped from their current class beginning next month
- ☐ I understand that by dropping my student, I am giving up their spot in their class slot and may not be guaranteed to be able to return to my original class day/time upon re-enrollment
- ☐ I understand that should I desire to return to Kids Kingdom Sports Center at a later point in time that my annual membership fee will still apply for 12 months from its original date.
- ☐ I understand that this drop request form must be received by Kids Kingdom on or before the last 7 days PRIOR to my student's next month class(s).

Student name: \_\_\_\_\_ Class: \_\_\_\_\_ Class Day/Time: \_\_\_\_\_

Student name: \_\_\_\_\_ Class: \_\_\_\_\_ Class Day/Time: \_\_\_\_\_

Student name: \_\_\_\_\_ Class: \_\_\_\_\_ Class Day/Time: \_\_\_\_\_

Parent name: \_\_\_\_\_ Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Each and every customer is extremely valuable and important to us. In order to create the best program possible, we are continuously looking for ways to improve our program. We would greatly appreciate you answering the following questions regarding the reason for your students drop. Thank you for your time!

- 1) What is the primary reason you are leaving Kids Kingdom Sports Center at this time? (Please circle all that apply)
- a. Schedule conflict
  - b. Alternate sport/activity beginning
  - c. Gymnast lost interest in gymnastics
  - d. Other: (Please indicate) \_\_\_\_\_

- 2) Did Kids Kingdom Sports Center meet your expectations for your student's gymnastics needs? Why or Why not?

\_\_\_\_\_  
\_\_\_\_\_

- 3) Would you recommend Kids Kingdom Sports Center to your friends and family?

- ☐ Yes
- ☐ No

- 4) Do you intend on returning to Kids Kingdom Sports Center at a later time?

- ☐ Yes
- ☐ No