

Charlotte Martial Arts Academy

Temporary Hold Form

Student's Name: _____

Stop Date _____ Start Date _____

I understand that I may take a Leave of Absence if I am unable to attend regular classes. I may take up to 60 continuous days off with no penalty. I will not be responsible for tuition payments during my time off. ____ (initial)

CMAA will automatically restart my monthly draft at the end of my Temporary Hold. _____ (initial)

I understand that, if at the end of the 60 days, I am unable to resume attendance in regular class I need to fill out a cancellation of membership to stop my automatic payments. _____ (initial)

Under NO CIRCUMSTANCE will CMAA refund automatic monthly drafts if a cancellation form is not submitted PRIOR TO the draft date. _____ (initial)

Parent Name: _____

Signature _____ Date _____

Home Phone _____ Work/Cell Phone _____

Email: _____

Staff Signature _____ Date _____