



FIRST ENVIRONMENTS EARLY LEARNING CENTER

109 TW Alexander Drive, MD FE-105, RTP, NC 27711

**WITHDRAWAL FORM**  
**NOTE: 30 day notice required**  
**(minimum)**

Date of notification of intent to withdraw: \_\_\_\_\_  
Date you wish to withdraw: \_\_\_\_\_

*(Please check one of the following options for the deposit refund)*

I would like to donate all or a portion of the deposit refund to:

- A) The FEELC Tuition Scholarship Fund. Yes \_\_\_\_ If yes, list the amount that you would like to donate. \_\_\_\_\_
- B) The FEELC Emergency Fund. Yes \_\_\_\_ If yes, list the amount that you would like to donate. \_\_\_\_\_

First Environments Federal Tax Id # 58-1696674

I would like 100% of the deposit refund returned to me within 30 days **after** withdrawal from FEELC. \_\_\_\_\_

Child's name: \_\_\_\_\_  
Parents' name(s) \_\_\_\_\_  
Street Address: \_\_\_\_\_  
Email: \_\_\_\_\_

Signature / Date: \_\_\_\_\_

**\*\*\*Must return purple hang tags\*\*\***

Approved by: \_\_\_\_\_

**Instructions to Parent(s)**

Complete form and return it to Beth Lake and Heather Ray.

Return hang tags to Kim Graper      Received \_\_\_\_\_ Tag # \_\_\_\_\_ Date \_\_\_\_\_

**Contact information for Beth Lake and Heather Ray:**

Telephone: 919-541-9452

Email: [blake@firstenvironments.org](mailto:blake@firstenvironments.org) and [hlay@firstenvironments.org](mailto:hlay@firstenvironments.org)