

# TERMINATION NOTICE

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

Child's Name: \_\_\_\_\_

Family Name: \_\_\_\_\_

This note is to inform you that effective \_\_\_\_\_, childcare provided  
(date)

by \_\_\_\_\_ will be terminated.  
(Child Care Provider)

Last day of care will be: \_\_\_\_\_  
(date)

**Please adhere to termination policies with regards to payment and settling of your account.**

Reasons for Termination:

---

---

---

---

Signed \_\_\_\_\_