

Northern Nevada Aquatics

Swimmer Resignation Form

Date: _____

From: _____ (Parent Name)

This is to inform Northern Nevada Aquatics that effective the 1st day _____, my son(s)/daughters(s), _____, will be resigning from the team.

Reason for resignation:

I/We understand I/we remain fully responsible for any unpaid balances due to Northern Nevada Aquatics up to the above effective date.

Submitted by,

Printed Name of Parent

Signature of Parent

Return form to:

Northern Nevada Aquatics
1135 Terminal Way #106, Reno, NV 89502

Please note: This form must be completed and mailed to the team by the 15th of the month prior to the month in which the termination is planned to begin. If the form is not received by the 15th, the resignation will not be effective until the following month and the member will be responsible for all fees and charges normally assessed during the billing cycle.