



## Terminating Services

6701 W. Emory Road  
Knoxville, TN 37931  
865-938-9164  
www.SHADESofDevelopment.org  
a non-profit corporation

I understand that I must submit a two week notice in writing upon terminating services with SHADES of Development. This form serves as my two week notice. I understand that SHADES does not prorate fees and my notice will take effect on the Monday after the second billing cycle preceding my notice.

Name \_\_\_\_\_

Child(ren)'s Name \_\_\_\_\_

Date Submitted \_\_\_\_\_

Last day of service will be Friday, \_\_\_\_\_

Reason:

No longer need service       Moving       Financial reasons       Other \_\_\_\_\_

Is there anything else you would like us to know? \_\_\_\_\_

\_\_\_\_\_

*Office Use Only*

Received by \_\_\_\_\_ Date \_\_\_\_\_ Site \_\_\_\_\_