

# MANHATTAN BEACH ATHLETIC FOUNDATION



## **2010 MBAF Summer School Course Withdrawal Form**

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

Student Name: \_\_\_\_\_

Student Number: \_\_\_\_\_

### **Requesting Withdrawal From:**

One Semester Class \_\_\_\_\_

PhyEd/Activity Class \_\_\_\_\_

Parent Signature \_\_\_\_\_

***Please Review Refund Policy Before Submitting Request!***