

TOTAL TAEKWONDO

totaltkdcolumbus.com

STOP MY BILLING

Bring this form to the Business Office or submit by Mail

Date

Student Name

(s): _____

Email: _____

Home Phone: _____

Address: _____

Work Phone: _____

Cell Phone: _____

Total Taekwondo has been glad to serve you. Please take a moment to provide us with valuable feedback that will help to further improve our programs and service. Thank You

	Excellent	Good	Fair	Poor
Instructors were knowledgeable and well trained :	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Class times were convenient and accessible:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Facilities were clean and neat:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Curriculum was easy to understand and follow:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
You were kept current on Total Taekwondo events:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall, How would you rate your experience:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Reason for stopping billing: Moving Financial No Time Work Relocation

Summer /Holiday Break Other: _____

Absence begin date: _____ Returning to class? _____ Estimated Date: _____

I understand that I am resigning my membership with Total Taekwondo. I understand that it may take up to two weeks to process this request due to holidays, weekends, etc. I understand that if this document is submitted between the 1st and 15th of the month, then I will not be billed for the next month. I understand that if this document is submitted after the 15th, then I will still be billed for the upcoming month. Billing will be discontinued after that. (Example #1 "Stop My Billing" form is received on the 12th of June. Result: You will not be billed for July. Example #2 "Stop My Billing" form is received on 25th of June. Result: You will be billed for July. You will not be billed for August)

Name: _____ Signature: _____

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