



Education Division Afternoon activities

TERMINATION OF PARTICIPATION IN AFTERNOON ACTIVITIES

THIS NOTIFICATION SHOULD BE SENT TO THE EDUCATION DEPARTMENT:

City of Helsinki Education Division, Afternoon activities P.O. Box 51300 FI-00099 CITY OF HELSINKI

E-mail address: iltapaivatoiminta@hel.fi

Street address: Töysänkatu 2 D

| | Surname and first names of the c | hild | Date of birth |
|--------------------|--|---------------------------------------|-------------------|
| 1. Basic infor- | Street adress | | Postcode and city |
| mation | Street adress | | Postcode and city |
| | Organiser and location of afternoon activities | | |
| | Surname and first name of the guardian | | |
| | Invoice address (if different from t | he child's) | Postcode and city |
| | Contact number during the day | | |
| | E-mail address (if you wish to receive confirmation of the termination via e-mail) | | |
| 2. Termination | For example, if your child will no longer be participating in afternoon activities as of 1 May, the Education Division must receive the termination notice by the end of March. The client fee will then still be charged for April, which is the month of termination. My child will no longer be participating in afternoon activities as of | | |
| | The period of termination is 1 whole calendar month. The period of termination is calculated from the last day of the month in which the Education Division receives the notice of termination. If the child does not participate in afternoon activities during the month of termination, the client will be charged half of the normal monthly client fee. If the child does participate in the activities, the monthly client fee will be charged in full. | | |
| | Date | Guardian's signature and printed name | |

TO BE COMPLETED BY THE PERSON RECEIVING THE FORM

| ſ | Date | Recipient and printed name | |
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