

Class Cancellation Form / 受講キャンセル届

Student & Class Information (日本語可)

Student Name		Date	
			MM / DD / YY
Teacher		Cancelled Class / Date & Time	
	Sensei	/ ()	—
Reason for Cancellation:			

When is convenient for you to reschedule? / 振替をご希望ですか？

Please tell us as many dates as possible in the following space.

/ 振替希望日をご記入下さい。* 振替は月1回のみ可能です。

	Date	Time
1	/ ()	—
2	/ ()	—
3	/ ()	—

Note:

In the case your teacher isn't available, we will provide you with another teacher.

/ 通常の先生が授業できない場合は、他の先生のレッスンになります。

Office Use

Teacher's Name	Re-Scheduled : Date & Time	Schedule Access Date
	/ () : - :	/
Date of notification		Office Sigh
/ ()	Office / Tel / E-mail	
Memo:		