

STREAMLINE AQUATICS — ACCOUNT WITHDRAWAL REQUEST FORM

Submit by the 20th of the prior month. Account must have a \$0.00 balance to process.

Email completed form to: billing@streamlineaquatics.org

Policy Terms (summary)

- Membership continues until you notify us in writing using this form (email to billing@streamlineaquatics.org).
- To avoid additional billing, submit by 11:59 pm San Antonio time on or before the 20th of the month prior to the requested withdrawal.
- Requests submitted by the 20th: you will owe dues for the next Monthly Billing Period (Jan–Dec).
- Requests submitted after the 20th: you will owe dues for the next two Monthly Billing Periods.
- The swimmer's last eligible practice/meet date is the final day of the final billed Monthly Billing Period.
- Account must reflect a \$0.00 balance to finalize the status change.
- Possible exception for military relocation: email documentation for consideration.
- Effective Withdrawal Date is the last day of the final billed Monthly Billing Period unless otherwise noted by the club.

Swimmer's Name *

Practice Pool

Swimmer's Group (check one) *

☐ Explorer 1

☐ Explorer 2

☐ Explorer 3

☐ Home School

☐ Inspired

☐ Dream Team (DT)

☐ Performance

Requested Withdrawal — Monthly Billing Period * (e.g., "April")

Effective Withdrawal Date * (last day of final billed Monthly Billing Period)

Form Submission Date *

Reason for Withdrawal *

Parent/Guardian Name *

Parent/Guardian Email *

Signature (type full name if submitting electronically) *

Date *

☐ I have read and agree to the Policy Terms above.

Directions: Type directly into the fillable fields, save the PDF, and email it as an attachment.

Suggested filename: LastName_FirstName_Withdrawal.pdf

Email to: billing@streamlineaquatics.org on or before the 20th of the prior month.