

ODAC Withdrawal Form

My child(ren) _____ will no longer be swimming with the Old Dominion Aquatic Club. The reason for leaving ODAC is:

My child(ren)'s coach(s) is/are _____

If you still have other children swimming with ODAC, please list them here:

If you will no longer have any children swimming, please continue with this withdrawal form:

I am on BINGO team: Wed 1 Wed 2 Wed 3 Sun 1 Sun 2 Sun 3 N/A

Parent volunteer positions (ie: BINGO instants captain, social, etc):

Our experience with ODAC was _____ positive _____ negative

Suggestions for improvement of ODAC include:

- My child will be withdrawn from ODAC **two weeks from the day that this form is received by the ODAC office.**
- I understand that I am responsible for completing any BINGO or meet obligations that fall in this two-week time period.
- I am financially liable for all outstanding balances.
- Should my child decide to re-join ODAC next season, he/she will be eligible to

begin swimming with the team on January 1st of the following swim season.

Signed: _____

** This form may be sent to Valerie Pyron via electronic submission, or US Postal service.

e-mail: vpyron@cox.net ; karensundahl@swimodac.com

mail : Swim ODAC
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