

Maison Relais Packatuffi

Maison 84
L-9768 Reuler

Form SEA-15

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Termination of childcare contract

I, the undersigned _____
First name and Surname of legal guardian of the child

declare that my child _____
First name and Surname of the child

will permanently leave your institution on _____ / ____ / ____ .
date of last attendance

The legal representative may terminate the care contract at any time with one month's notice to the 1st of the following month without giving reasons.

Place:

Date:

Signature of legal guardian

For administrative use	
<i>Form submitted</i>	on ____ / ____ / ____ at ____ a.m./p.m.
<i>Submitted via</i>	<input type="checkbox"/> E-mail <input type="checkbox"/> post <input type="checkbox"/> delivered by hand _____