



Greater Richmond School of Music

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GRSM BAND PROGRAM

Disenrollment Request Form

Responsible Party Name: _____ **Email address:** _____

Student's Name: _____ **Instrument:** _____

School: _____ **Date:** _____

Please note that the GRSM Band Program is a full school year program, and all members of the band depend on each other to ensure its continuity throughout the school year. If your disenrollment reduces the number of students to below that sustainable by the program, the band may be forced to be cancelled for the remainder of the school year. Your decision is very important and affects all members of the band, so please assess your request carefully before submitting it. Disenrollment is allowed only after the first semester, and forms must be received by GRSM Admin no later than January 7th.

Student's reason for Disenrollment Request:

Student Signature: _____

Responsible Party Comments:

Responsible Party Signature: _____