

Refund Request Form

Park and Recreation Department 40 Fairbank Road Sudbury, MA 01776 978-443-1092 McNamaraK@sudbury.ma.us

REFUND POLICY

All refunds are processed once a week, on Thursdays, regardless of the day of the week it is requested.

All refund requests must be made in writing, by completing this form in its entirety. No request will be processed without this form.

Full refunds will be given if the program is cancelled by the Park & Recreation Department.

All refund request must be received 7 business days prior to the start of the program. Refund requests received at least 7 days prior to the start of the program will be assessed a \$5.00 withdrawal fee; except for summer programs, which will be assessed a \$25.00 withdrawal fee. After 7 business days, no refunds will be granted.

No refunds will be issued for American Red Cross programs.

If you pay by check, you must submit a copy of the cancelled check with this form.

Refund requests for all Park & Recreation run summer programs (Sudbury Summer, Sudbury Summer Inclusion, CIT, Preschool Pals, and Sudbury Adventure) must be received on or before June 15. Refund requests made prior to June 15th will be accessed a \$25.00 withdrawal fee. After June 15th, no refunds will be granted for these programs.

Refunds after the class has begun or after the class has ended may be considered on a case by case basis.

Participants Name:				
	First	М	Last	
Program Name:	Program Date(s):			
Date of Registration:	Invoice Numb	er:	Fee Paid:	
Payment method: Cash	Check: #	Credit	Card	
Reason for refund request:				
Medical illness	Personal Conflict		Class schedule changed	
Other:				
Signature:			Date:	



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	FOR E	DEPARTMENT USE ONLY	
Date Received:	Date Reviewed:		Reviewed by:
Fee assessed:	Total refund amount:		_
Refunded in Authorize: YES	NO	Date:	Initials:
Refunded in MyRec: YES	NO	Date:	Initials: