# **REFUND REQUEST FORM**

To request a refund for a Parks and Recreation Department Program, complete Sections 1-4 below:

SECTION1: General Information	
Main Contact (Full name):	
Program Participant (If different from above):	
Address:	
	Zip Code:
	Cell Phone:
Email Address:	
SECTION 2: Program Information	SECTION 3: Reason for Withdrawal/Cancellation
Program Name:	Class/Program/Camp Cancellation
Program Date:	Conflict of Dates
Facility:	Medical (Attach health care provider documentation)  Other (Explain)
Receipt #:	
SECTION 4: Method of Payment for Program or Rental	
Program Fee(s) Paid: \$ Date(s) Fees Paid:	
Please choose Refund Type: Check (3-4 weeks) 🗖 Account Credit (immediate) 🗖	
x	Staff Initial
Parent/Guardian or Adult Participant Signature	Date
FOR OFFICE USE ONLY	
Program/Rental Fee(s)	Less: Non-Refundable Fee(s)
BALANCE TO BE REFUNDED \$	Entered in RecTrac
Date Refund Processed By	
PLEASE FILL OUT IF REFUND BY CHECK:	
Budget Code: 011.8000.347    Sent E-Mail to Finance Dept.	
EDEN: Pay to Code # Doc #	Notes:

To request this material in alternate format, sign language interpreter (five-day notice required), information on access for persons with disabilities, and/or any accommodation to review any document or participate in any city-sponsored proceedings, call 305.604.2489 and select 1 for English or 2 for Spanish, then option 6; TTY users may call via 711 (Florida Relay Service). Updated 2/10/21

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# **REFUND POLICY**

We understand that things come up and you may need to cancel participation in a program, camp or class. In these instances please complete the Refund Request Form. We encourage you to apply the refund to your account as a credit for future use. However, you may also request a refund in the form of a check. Unfortunately, we are not able to issue refunds if a cancellation is a result due to a safety concern, natural disaster, inclement weather, non-attendance of a child from any program or any other condition outside of the our control. Below please find the Refund Policies for each corresponding activity. We reserve the right to cancel under-enrolled programs, camps or classes for which a full refund will be issued. No refunds will be issued for \$25.00 or less. Refunds, regardless of original payment method, will be issued by check. Please allow approximately 3 to 4 weeks for check to be issued.

## • SUMMER CAMP, SPECIALTY CAMPS, CLASSES AND PROGRAMS REFUND POLICY

Due to the seasonal nature of our camps, classes & programs, their popularity and limited space, we are precluded from issuing any refunds or credits within two weeks of the program start date for any cause. Refund requests must be received in writing two weeks prior to program start date to receive a 50% refund OR a full credit to be applied to a sibling or another program within the same fiscal year.

### AFTER-SCHOOL PROGRAM REFUND POLICY

Refunds requests must be received in writing seven days in advance of program start date to receive a full refund, less the \$25.00 administrative fee. Refunds requests made after the seven day grace period may be eligible for a refund or credit. Dates of attendance may alter the amount (if any) of refund. Refunds can be disbursed in one of the following ways:

- A 50% refund of the total fee (A check will be issued 4-6 weeks after a request is received; NO Cash Refunds). **OR**
- A full credit less the \$25.00 administrative fee to be used for another Recreation class, camp, or program.

Credit must be used within the same fiscal year. After this period, any unused credits will be voided. Credit issued has no monetary value. No refund/credits will be issued after the three week period.

### • **PROGRAM CANCELLATIONS**

In the event of program cancellations due to, but not limited to, lack of enrollment, force majeure, etc. a credit will automatically be applied to your RecTrac account to use for future programming. If you would like to request a refund by check, please send a Refund Request form to recreation@miamibeachfl.gov.

### MEDICAL CANCELLATION POLICY

We understand that medical issues may occur. If you are cancelling due to a medical condition, please complete a Refund Request Form and provide documentation from a health care provider/doctor. The refund amount will be issued for unattended days. These requests will be considered on a case by case basis.