

**REFUND REQUEST AND POLICIES  
PARKS & RECREATION DEPARTMENT  
CITY OF CARPINTERIA**

Our programs are staffed based upon enrollment. Program fees are not pro-rated. *All refund requests must be in writing and received at City Hall 48 hours prior to the first day of the enrolled program. A copy of your paid receipt or canceled check must be submitted along with your refund request.* All credit card refunds will be paid by check. Full refunds will not be granted unless the refund request is received **48 hours** prior to the first day of class. A \$10 processing fee will be deducted from all refunds requested, unless the program was canceled by the City.

<b>For Office Use Only</b>	
<i>All approvals must be initialed</i>	
<input type="checkbox"/> Approved by: _____	
<input type="checkbox"/> Processing Fee Deducted: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Refund Amount \$ _____	

City of Carpinteria  
**Summer Programs**  
5775 Carpinteria Avenue  
Carpinteria, CA 93013  
**(805) 684-5405 ext. 432**

**In order to serve you better, please use this form and include the following information:  
Please print clearly!**

**Proof of payment showing date paid (copy of receipt or canceled check)**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Program: \_\_\_\_\_ Session #: \_\_\_\_\_ Participant Name: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Payment type:    Cash     Check     Visa     MasterCard

Credit Card Number: \_\_\_\_\_

Reason for the request: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Program dates missed: \_\_\_\_\_

\_\_\_\_\_

**Note: All credit card refunds will be paid by check.**

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

**KEEP THIS FORM WITH YOUR PAID RECEIPT**