PLEASE PRINT

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APPLICATION FOR REFUND, CREDIT, TRANSFER or FAMILY DISCOUNT

DEPARTMENT OF COMMUNITY SERVICES
RECREATION DIVISION

CONTACT INFORMATION — SECTION 1

Participant's Name _____ Main Contact _____

Address _____ City/Town _____ Postal Code _____

Phone Number (Home) _____ (Work) _____ (Cell) _____

Email Address _____

Program or Activity _____ Receipt Attached Yes ☐ No ☐

Program Start Date _____ Program End Date _____ Medical Note Attached, if applicable Yes ☐ No ☐

Reason for Request: _____

_____

Please indicate type of request: (Please note submission of application does not automatically guarantee a refund/credit/transfer/family discount.)

- ☐ **Refund** - (Cash, Cheque and Debit sales are refunded via cheque refund. Allow 4-6 weeks. Credit card sales can be refunded back to same credit card.)
- ☐ **Credit to your Recreation Account** - Valid for one (1) calendar year.
- ☐ **Family Discount** - (20% for third or more children registered in same week in applicable programs)
- ☐ **Transfer** from course noted above into **Program Name:** _____ **Course #:** _____
  Start Date: _____ **Location:** _____

Customer's Signature: _____ Date (yyyy-mm-dd): _____

POLICY — SECTION 2

Please be aware of the following guidelines:

1. Applications must be submitted fourteen (14) days prior to the start date of the program or facility rental, except for the After School Program which must be submitted one month prior to the first day of the upcoming month.
2. Transfers may be considered if time and/or space permit in the requested program.
3. Telephone or general email requests for refunds are not accepted. An application must be completed and submitted.
4. Applications for medical reasons must be submitted prior to the program end date and must include a medical note.
5. Applications for a Family Discount must be submitted prior to the program end date.
6. Refunds or credits will not be issued for lost or stolen passes.
7. Refunds or credits will not be issued for individual classes missed due to illness even if a medical note is attached.
8. Refunds for payments by cash, cheque or debit will be refunded by cheque only. Please allow 4-6 weeks.
9. Refunds for payments by credit card will be refunded back to the same credit card.
10. A credit on your Recreation Account is valid for one (1) calendar year. After this period, the credit will be removed.
11. A $25 non-refundable deposit (per child, per week) will be deducted for all day camp refund requests.
12. A $100 non-refundable deposit (per child) will be deducted for all day camp refund requests.
13. Please include a copy of your receipt and/or rental agreement with your request.

The completed form can be mailed to the following address:

City of St. John's
Recreation Account Representative
P.O. Box 908, St. John's, NL A1C 5M2

OR the form can be emailed to: recreation@stjohns.ca

OR

The completed form can be dropped off at either of the following locations:

H.G.R. Mews Community Centre, 40 Mundy Pond Road or fax 709-576-5691
Wedgewood Park Recreation Centre, 47 Gleneyre Street or fax 709-576-8146
Recreation Division Offices, Crosbie Building, 1 Crosbie Place or fax 709-576-8469

For more information, please call 709-576-8499 or 709-576-8631

For Office Use Only:

Form Received By (staff name): _____ Title: _____

Signature: _____ Date (yyyy-mm-dd): _____

ST. JOHN'S
NEWFOUNDLAND AND LABRADOR, CANADA