



**PENINSULA FAMILY YMCA
Summer Camp Cancellation
REQUEST FORM
(Vouchers & Refunds)**

PLEASE READ CAREFULLY: YMCA of San Diego County Cancellation Policy:
Cancellation before the start date of the camp: 100% voucher or refund less program deposit and vendor fees. After the first meeting of the camp: 75% voucher or refund less program deposit and vendor fees. After the second meeting of the camp: \$0 refund (medical/special circumstance at the branch's discretion).

I HAVE READ AND UNDERSTAND THE ABOVE POLICY:

_____ Today's Date: _____
(Signature Required)

PLEASE COMPLETE IN FULL (Subject to Approval):

PLEASE COMPLETE IN FULL:

Name of Camper: _____ Birthdate: _____

Guardian Name: _____ Phone: _____

Email: _____

Camp Enrolled in:

Week # _____ Camp Name _____

Week # _____ Camp Name _____

Reason for Request: _____

Apply deposit(s) toward balance for: Week # _____ Camp Name _____

****FOR REFUND ONLY**

___ Check: Refund checks are issued by our Corporate Office, 2-3 weeks.

___ Credit Card: Provide information below, 2-3 days. (Credit Card information is not kept on file)

Credit Card Number used for payment: _____ Exp. Date: _____

The Following is for OFFICE USE ONLY:

\$ _____ Original Amount Paid

_____ 100% REFUND

_____ 75% REFUND

(-\$10.00 or -\$50) Minus Deposit: (If waived, please Explain.) _____

\$ _____ TOTAL REFUND / Account #: _____

Director's personal follow-up contact: Date: _____ Time: _____

Discussion/Comments/Resolution:

Director's Signature _____ Date: _____