



Parks & Recreation

10455 Armstrong Street, Fairfax, VA 22030
Office: 703-385-7858 parksrec@fairfaxva.gov

Request for Refund/Withdrawal

The City of Fairfax Parks and Recreation reserves the right to accept or decline refund requests.

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

Refund/Withdrawal Requested for (name of class or program):

Dates of Class or Program: \_\_\_\_\_

Reason for refund/withdrawal request: (attach any additional documents, i.e. doctor's notes, ect)

Amount Requested for Refund: \_\_\_\_\_

Reimbursed by (original payment form only):

Credit Card(last four digits of credit card: \_\_\_\_\_) Check Cash
Please note: All cash or check payment will be refunded by check. Check refunds could take 2-6 weeks to process.

Name of payer: \_\_\_\_\_

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

Phone #: \_\_\_\_\_

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

I have read and understand the City of Fairfax Parks and Recreation Policies and Procedures. I also understand some programs are non-refundable, a deposit will be withheld or cancellation fee will be incurred (i.e camps, senior trips and facility rentals). The City of Fairfax Parks and Recreation Department reserves the right to accept or decline your refund request. Notification of approval or decline of the refund will be within 5 business days.

Signature of Applicant

Date

-----For Staff Use Only-----

Type of refund: Full Partial/Pro-rated Amount to be refunded \$

Staff Authorization Date: