

# River Valley Special Recreation Association Refund Request Form

RVSRA understands issues may arise from time to time when it comes to the ability to attend a program you are registered for. Full refunds will be provided if requested at least **7 days** prior to the program start date, unless RVSRA has already incurred expenses related to the program (tickets, staffing, etc.)

To request a refund for a program, please complete the form below. Return the form to the office or via email at [support@rivervalleysra.com](mailto:support@rivervalleysra.com). Contact support@rivervalleysra.com with any questions.

Participant Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Parent/Guardian Contact Email: \_\_\_\_\_

Name of Program (you are requesting refund for): \_\_\_\_\_

Date(s) of program you are requesting refund for: \_\_\_\_\_

Reason for Refund Request (check one):

Illness/Medical (doctor's note may be required)

I am relocating

Other: \_\_\_\_\_

Additional comments or questions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

***If granted, your refund will be applied towards an existing balance or added as a credit to your Ultra Camp account. You will be notified when/if your refund request is processed.***

## FOR OFFICE USE ONLY:

Staff Initials: \_\_\_\_\_

Refund Granted (Y/N): \_\_\_\_\_

Amount Applied as Credit: \_\_\_\_\_

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