


Morrisville Parks, Recreation, & Cultural Resources Cancellation / Refund / Transfer Request Form

All requests for cancellations, refunds, and/or transfer requests must be in writing on the cancellation / refund / transfer request form

A full refund is given if the Parks, Recreation & Cultural Resources Department cancels a program, facility rental or athletics league. Refunds are not given for individual class or game cancellations due to weather or circumstances beyond the control of the Department. Makeup sessions/games are scheduled whenever possible. A full refund minus a \$5.00 administrative fee (per activity) will be considered if written notice of registration cancellation is received at least 14 calendar days prior to the program starting. If Refund Request is received less than 14 calendar days prior to the program starting, a 50% refund will be considered only if the enrollment can be filled from a waiting list. No refunds are considered after completion of programs, facility rentals or athletic leagues.

Please see reverse side for specific program, athletic league, and rental refund policies and information.

- Participant's Name: _____ 
- Parent's Name (if applicable): _____
- Mailing Address: _____

- E-Mail Address: _____
- Telephone Number: _____
- Last Day in Program / Cancellation Date: _____
- Activity, Athletic League, Class, Membership, Camp, or Trip Cancellation: (check appropriate box OR fill in activity code)

<input type="checkbox"/> Activity Code: _____	<input type="checkbox"/> Activity, Class, Trip: _____
<input type="checkbox"/> Baseball / Softball (youth)	<input type="checkbox"/> Basketball (corporate)
<input type="checkbox"/> Basketball (youth)	<input type="checkbox"/> Membership (MAFC)
<input type="checkbox"/> Preschool Programs (Ready Set Go, Academic Adventures)	<input type="checkbox"/> Soccer (youth)
<input type="checkbox"/> Volleyball (youth)	<input type="checkbox"/> Youth Programs (Early Arrivals, After School, School's Out Days)
<input type="checkbox"/> Camp: _____	
- Facility Rentals

Park / Facility Location: _____

Space(s) Rented: _____

Date: _____ Time: _____
- Reason for request (please attach any necessary medical documents to this form):

Please fill out information on reverse side of this page

Cancellation / Refund / Transfer Policies

Please initial by the program(s) refund policy from which you are requesting a refund.

_____ Initials **Youth Athletic Registrations:** A full refund minus a \$5.00 administrative fee will be considered if written request is received prior to the following: Spring leagues – March 1; Fall leagues – August 1; Winter leagues – November 1. For youth athletics refund requests received after these dates, a 50% refund will be considered only if the enrollment can be filled from a waiting list.

_____ Initials **Facility Rental:** Subject to a full refund if the Parks, Recreation & Cultural Resources Department cancels a facility rental. Rental fees are refunded at 50% if renter gives written notice of cancellation at least 14 calendar days prior to reservation date. There will be no refunds given for rental cancellations within 14 calendar days of reservation date. No refunds are considered after the completion of a facility rental.

_____ Initials **Medical Hardship:** Cases will be handled at the discretion of the Director of Parks, Recreation & Cultural Resources. Medical documentation may be required during review of the refund request.

_____ Initials **Aquatics & Fitness Center:** 1 year (paid in advance) membership fees require proof of medical documentation stating inability to participate or take part in physical activity or relocation of no less than 15-mile radius from MAFC. Approved refunds will be pro-rated based on months remaining in membership minus a \$5.00 administrative fee. No refund requests for Monthly (paid in advance) memberships or Punch Passes will be accepted, for any reasons. Bank drafts are done on the 15th of every month beginning with the second 15th after initial enrollment and payment. Bank draft memberships shall be for a minimum of 4 months and can be cancelled at any time after the first 4 months with a written request at least 14 calendar days prior to requested date.

_____ Initials **Cedar Fork Community Center:** Programs such as Early Arrivals, After School and Preschool are eligible for a full refund minus a \$5.00 administrative fee if written notice of cancellation is given at least 14 calendar days before the start of the program. After programs have started, or less than 14 calendar days before programs begin, a pro-rated refund will be considered on a case by case basis and will be based on the elapsed program time and the balance of paid time remaining (14 calendar days advance notice is required). Teacher Workday Camps are eligible for a full refund minus a \$5.00 administrative fee if written notice of cancellation is given at least 14 calendar days before the start of the program. For all camp programs, the balance, minus the \$25 non-refundable weekly deposit and a \$5.00 administrative fee may be refunded if the refund request is granted.

Select Programs and Rentals may contain exceptions to the refund policy. For further details, please refer to the particular program's registration form or facility rental information.

Appeals: Should be submitted to the Director of Parks, Recreation & Cultural Resources.

Transfer request(s) of registration fee(s) may be done so under the following conditions: All requests for transfer must be made in writing and submitted 14 calendar days prior to the beginning of the program, facility rental or athletic league, and are considered on a case by case basis. All approved transfer(s) will be subject to a \$5.00 administrative fee. If notice of transfer is given less than 14 calendar days prior to the program starting, teams being selected or the facility rental date, the transfer(s) could be denied. Transfers may only be for the registered participant. Transfers cannot be applied to another household or another member of the same household. There must be registration space available in the requested program. The request must be for a similar program that is offered within an appropriate time frame as determined by the Department.

All sales of tickets or admission for special events are final. No refunds will be approved. No refunds are considered after completion of programs, facility rentals or athletic leagues.

By signing below, I understand this form in no way guarantees a refund will be granted. My request must meet the required standards set forth in the refund policy to be eligible for a refund.

Signature: _____ Date: _____

For Office Use Only

Date request was received: _____ Staff Initials: _____ Was request granted: Yes No
Recommended Refund Amount: \$ _____

- | | | |
|---|--|--|
| <input type="checkbox"/> Deposit | <input type="checkbox"/> Family Emergency | <input type="checkbox"/> Incorrect Enrollment/Registration |
| <input type="checkbox"/> Instructor/Class Dissatisfaction | <input type="checkbox"/> Program Cancelled | <input type="checkbox"/> Scheduling Conflict |
| <input type="checkbox"/> Sickness/Illness/Injury | <input type="checkbox"/> Transfer | <input type="checkbox"/> Other: _____ |