

CITY OF MIRAMAR

PARKS AND RECREATION DEPARTMENT- REFUND REQUEST FORM

RECREATIONAL PROGRAM/RENTAL AND SECURITY DEPOSIT REFUND REQUEST GUIDELINESS:

- AS PER CITY POLICY, ANY CANCELATIONS OR REFUND REQUESTS MUST BE MADE AT LEAST SEVEN DAYS (7) PRIOR
 TO THE BEGINNING OF THE SESSION, THE DAY OF THE PARTY AND MUST BE ACCOMPANIED WITH A VALID ID AND
 THE ORIGINAL RECEIPT AT ALL TIMES.
- The refund request form must be properly completed and signed by the customer.
- REFUND REQUEST FORMS can be PICKED UP, COMPLETED AND DROPPED OFF AT:
 - Vizcaya Park | 14200 SW 55th Street, Miramar, FL 33027
 - o Ansin Sports Complex | 10801 Miramar Boulevard, Miramar, FL 33025
 - VEH Youth Enrichment Center | 7000 Miramar Parkway, Miramar, FL 33023
 - Sunset Lakes Community Center | 2801 SW 186th Avenue, Miramar, FL 33029

ATTENTION CUSTUMERS

- Customers are required to bring their original receipt and a valid ID in order for us to process the refund.
- There will be no refunds if you register for the class less than seven days prior to the beginning of the session and/or the day of the party
- Please note that Incomplete REFUND REQUEST FORMS will not be processed.
- Finance will only return money to the CUSTUMER who submitted the check or the money order to the City and Credit cards transactions will be credited to the same credit card that was used to pay for the services.
- Refunds may take up to 6 weeks to process if you pay by check or money order. (If you pay with a credit card it may take up to two business days after the event).
- City refund policy does not apply for Youth Groups or Contracted Classes.

Customer Name:

PLEASE READ ABOVE AND SIGN:

Customer Signature: _____

REQUESTOR'S NAME					DAT	E	
REQUESTOR'S FULL ADRESS INCOMPLETE ADRESS WILL NOT BE PROCESS PLEASE DOUBLE CHECK ADRESS				REQUESTOR'S SIGNATURE			
REQUESTOR'S PHONE NUMBERS	номе ()		CELLPHONE ()		
PARTICIPANT NAME				AMOUND REQ Finance will only retu the person who gave money ord	rn money to the check or	\$	
PAYMENT INFORMATION PLEASE (CHECK MARK)	CHECK		CREDIT CARD (LAS 4 #' S OF CRDIT CARD)	ST	MONEY OR	MONEY ORDER	
REASON FOR CANCELATION/ Customers if you need more space use the back part of							

OFFICE USE ONLY- SITE SUPERVISORS BEFORE THIS FORM IS TURNED INTO FOR FINAL REVIEW AND APPROVAL, COPY OF THE FOLLOWING DOCUMENTS PERTAINING TO THIS REFUND MUST BE ATTACHED.

COPY OF THE

WAIVER/ AND OR

RENTAL REQUEST

FORM.

REFUND REQUEST

FORM FULLY

COMPLETE

OPERATIONAL MANAGER

DEPOSIT SLIP FROM

THE CITY

COPY OF THE

CHECK/MONEY

ORDER AND OR

CREDCIT CARD

COPY OF THE

CUSTOMER'S ID

				AFFILOVAL SLIF	
REFUNI	D APPROVED: YES: NO:				
IF NOT, F	PLEASE EXPLAIN:				
NAME: _			DATE:		_
	PARKS AND RECREATION STAFF MEM	BER			
NIANAE			DATE		
	SITE SUPERVISOR		DAIL		_
NAME:			DATE:		_