

## CITY OF WELLAND Recreation & Culture Division

145 Lincoln Street, Welland, ON L3B 6E1

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## CITY OF WELLAND ~ RECREATION & CULTURE DIVISION

| 2025 SUMMER DAY CAMP WITHDRAWAL REQUEST FORM   |   |             |   |        |           |  |  |  |  |
|--|---|-------------|---|--------|-----------|--|--|--|--|
| PARTICIPANT INFORMAT   | ΓΙΟΝ  |             |   |        |           |  |  |  |  |
| Last Name:   |   | First Name: |   |        |           |  |  |  |  |
| Childs Name:   |   |             |   | Phone: |           |  |  |  |  |
| Current address:   |   |             | City/Town:                              |        |           |  |  |  |  |
| Postal Code:   |   | Email Add   | dress:                                  | ·      |           |  |  |  |  |
| INSTRUCTIONS   |   |             |   |        |           |  |  |  |  |
| administrated by phone, fax<br>constitute notice of withdrav<br>granted. Upon approval, ref  | requests for credits/refunds must be submitted by completing this form. Requests will not be ninistrated by phone, fax or email. Non-attendance and/or notification to staff/instructor does not stitute notice of withdrawal/ request. Submission <u>does not</u> guarantee that a credit or refund will be nted. Upon approval, refunds will be processed according to the date this form was received by division, it will not be backdated. |             |   |        |           |  |  |  |  |
| Refund Guidelines More than 30 days before camp: Full refund minus a non-refundable \$11.77 admin fee. 15–30 days before camp: Full refund minus a non-refundable \$76.06 admin fee per week. Less than 15 days before camp or once camp starts: No refund. Allow up to three weeks for processing. Refunds will be issued by cheque or, if paid by gift card, refunded to the gift card. Entitlements under \$10 will be credited to your account for future registrations. A customer service clerk will contact you about your request. |   |             |   |        |           |  |  |  |  |
| PROGRAM INFORMATIO   |   |             | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |        |           |  |  |  |  |
| PROGRAM: M   | UNCHKIN   |             | FUN FACTOR                              | RY     | KOOL KIDS |  |  |  |  |
| DATE   |   |             | F                                       |        |           |  |  |  |  |
| WEEK:  |   |             |   |        |           |  |  |  |  |
| WEEK:  |   |             |   |        |           |  |  |  |  |
| WEEK:  |   |             |   |        |           |  |  |  |  |
| ADDITIONAL COMMENTS  | 3   |             |   |        |           |  |  |  |  |
|  |   |             |   |        |           |  |  |  |  |
| Parent/Guardian:   |   |             | Date:                                   |        |           |  |  |  |  |
|  |   |             |   |        |           |  |  |  |  |

| OFFICE USE ONLY                                   |      |     |         |          |            |        |             |  |  |  |  |
|---|------|-----|---------|----------|------------|--------|-------------|--|--|--|--|
| STEP ONE  |      |     |         |          |            |        |             |  |  |  |  |
| Total fee for week(s) requesting to be withdrawn: |      |     |         |          |            |        |             |  |  |  |  |
| Payment already processed?                        |      | YES |         | NO       |            |        |             |  |  |  |  |
| Method of Payment?                                | CASH |     | CHEQUE  |          | P.D. C     | CHEQUE | CREDIT CARD |  |  |  |  |
| Postdated cheques on file?                        |      | YES |         | NO       |            |        |             |  |  |  |  |
| STEP TWO  |      |     |         |          |            |        |             |  |  |  |  |
| Postdated cheques to be returned?                 |      | YES |         | NO       | SHRED      |        |             |  |  |  |  |
| Administration fee?                               | YES  |     | NO; i   | f no, re | ason:      |        |             |  |  |  |  |
| Refund to be issued?                              | YES  |     | NO; i   | f no, re | ason:      |        |             |  |  |  |  |
| Amount to be returned?                            |      |     |         |          |            |        |             |  |  |  |  |
| CSC:  |      |     | Managem | ent/Co   | ordinator: |        |             |  |  |  |  |