



Saddleback Valley Unified School District

Cancellation Request

(Please review the refund policy carefully before filling out this form)

Refund/Cancellation Policy Effective December 1, 2010:

1. Full refunds/credits are available for courses cancelled by the Department only.
2. Refund requests must be received 3 business days prior to the start of program and will be subject to a \$10 withdrawal processing fee.
3. No partial refunds will be granted for swim lessons and/or camps.
4. All credits granted will be valid for one year from the date of issue.
5. NO withdrawals will be accepted after the completion of a program regardless of participant attendance.
6. Convenience fees for credit/debit transactions are non-refundable.

_____ Refund (Please see #2 above)

_____ Non Refundable Credit on Account (Valid for one year after date of issue)

Note: Payments made by check may take up to 45 days for refunds to process.

Date: _____ Participant Name: _____ Participant Bar Code #: _____

Parent/Guardian Name: _____

Address: _____ City: _____ Zip Code: _____

Home Phone: _____ Work Phone: _____

Program Name: _____ Program Number: _____ Fee: _____

Program Name: _____ Program Number: _____ Fee: _____

Previous Form of Payment: Check _____ Cash _____ Credit Card _____

Visa/Master Card Number: _____ Expiration Date: _____

What program materials did you receive? (uniform, etc) _____ How many days did you attend? _____

Reason for withdrawal: _____

Authorized Signature: _____ Date: _____

For Office Use Only

Please be sure that total deduction includes a \$10 withdrawal fee

Supervisor Authorization: _____ Total Deducted: _____ Total Refund: _____

Date Processed: _____ Initials: _____