



Refund Request Form

TOWN OF FOUNTAIN HILLS
16705 East Avenue of the Fountains
Fountain Hills, Arizona 85268
PHONE: (480) 816-5100 • FAX: (480) 837-3145

To request a refund for a Recreation Program, Senior Services Program, or a Park Facility, complete Sections 1-4 below.

SECTION 1: General Information

Date _____

Main Contact _____

Program Participant (If Different From Above) _____

Address _____

City, State, Postal Code _____

Phone _____

Email _____

SECTION 2: Course / Rental Information

Course Name _____

Course # _____

Park/Facility _____

Rental # _____

SECTION 3: Reason for Withdrawal / Cancellation

Course/Trip/Activity Cancelled

Relocation Out of Area

Medical (Attach Doctor's Note If Applicable)

Inclement Weather

Other (Explain) _____

SECTION 4: Method of Payment for Course or Facility

Course or Rental Fee(s) Paid \$ _____ Date Fees Paid _____

Cash

Check

Credit (Visa Master Card # _____ Exp _____)

Other _____

FOR OFFICE USE ONLY

SECTION 5: Refund Amount

Program/Facility Fee(s) _____

Less: Administrative Fee (\$10.00) _____

Less: Non-Refundable Fee(s) _____

BALANCE TO BE REFUNDED _____

SECTION 6: Staff Review / Approval (Initial)

Customer Service Representative _____

Recreation Coordinator _____

Park or Recreation Supervisor _____

Accounting Supervisor _____

SECTION 7: Refund Processing

Date Processed _____ By _____ Refund Type Check Credit Card Account Credit