South Whidbey Parks & Recreation District
5475 Maxwelton Road, Langley, WA 98260
Phone (360)221-5484 | Fax (360)221-7323 | swparks@whidbey.com

Refund Guidelines:

1. Full refunds will be given for all classes cancelled by SWPRD.
2. Refunds requested and submitted in writing using the Refund Request Form before the early fee deadline date (or at least 5 business days before start of program if no early fee deadline) will be subject to an 10% service fee, with a minimum service fee of $10.
3. SWPRD account credits requested and submitted in writing using the Refund Request Form before the early fee deadline date (or at least 5 business days before start of program if no early fee deadline) will be good for one calendar year from issue date, for the full fee paid and will not be subject to service fee.
4. Refunds or credits will not be issued if cancelled after deadline date or within 5 business days of program start.
5. To request a refund, a Refund Request Form must be submitted to the SWPRD office in writing. Verbal requests will not be honored. Forms are available at the SWPRD office or online. Please be aware that refund requests may take up to 45 days to process.
6. Refunds will not be issued from an account credit.
7. Refunds will not be issued for programs costing $10 or less (unless cancelled by SWPRD).
8. One day classes, trips, or special events are not covered under this policy (no refunds or credits available).
9. Certain contract programs, indicated with this symbol: §, have their own refund policies. Contact the contractor directly to inquire about their specific policy.

REFUND REQUEST

Participant Name_____

Requestor/Payee_____

Email _____   Phone_____

Mailing Address_____   City _____   Zip _____

Program Name _____   Date/Session _____

Reason _____

_____

_____

Signature_____   Date _____

☐   Please check here if you would prefer a SWPRD account credit instead of a refund (see line 3 above).

For Office Use Only

Date Request Received _____   Unsatisfied_____   SWPRD CANCEL_____

Program Cost $_____   Processing Fee $ _____   Notes _____

Refund Amount $ _____   Credit Amount $ _____   Approved by _____ on _____