



# 2023 Summer Daze Refund Request Form

Child's Name \_\_\_\_\_

Date of Request: \_\_\_\_\_

### REFUND POLICY

All requests for refunds must be submitted in writing by completing the Summer Daze Refund Request Form. Forms may be submitted directly to the Camp Director in person or emailed to [summerdaze@burbankca.gov](mailto:summerdaze@burbankca.gov). Forms can be obtained at each camp location or online at [www.burbankca.gov/camps](http://www.burbankca.gov/camps).

- A refund will be issued when request is received at least **10 business days** prior to the start of the week enrolled. *No refund will be issued after this time regardless of the reason of non-attendance.*
- For each week refunded, a **\$10 refund fee per child, per week** is withheld regardless of reason for refund.
- A refund will not be issued for days missed in a week and there are no make-up days.
- Any refund of camp fees may take up to one week after notification to be processed. After a refund has been issued, credit card refunds may take up to seven business days depending on your credit card company/bank and check refunds may take 3-6 weeks to receive.
- Session deposits and session camp fees (including extended care fees) are non-transferable and may not be applied toward another camp, session balance, or program.

Please check the camp/session(s) you would like to cancel.

Session	Dates	Camp Location		Last Day to Request Refund
1	May 30 - June 2 <i>No camp May 29</i>	<input type="checkbox"/> McCambridge Summer Daze	<input type="checkbox"/> Verdugo Summer Daze	Monday, May 15
		<input type="checkbox"/> Robert Gross Summer Daze	<input type="checkbox"/> TEEN Summer Daze	
2	June 5 - 9	<input type="checkbox"/> McCambridge Summer Daze	<input type="checkbox"/> Verdugo Summer Daze	Monday, May 22
		<input type="checkbox"/> Robert Gross Summer Daze	<input type="checkbox"/> TEEN Summer Daze	
3	June 12 - 16	<input type="checkbox"/> McCambridge Summer Daze	<input type="checkbox"/> Verdugo Summer Daze	Monday, May 29
		<input type="checkbox"/> Robert Gross Summer Daze	<input type="checkbox"/> TEEN Summer Daze	
4	June 20 - 23 <i>No camp June 19</i>	<input type="checkbox"/> McCambridge Summer Daze	<input type="checkbox"/> Verdugo Summer Daze	Monday, June 5
		<input type="checkbox"/> Robert Gross Summer Daze	<input type="checkbox"/> TEEN Summer Daze	
5	June 26 - 30	<input type="checkbox"/> McCambridge Summer Daze	<input type="checkbox"/> Verdugo Summer Daze	Monday, June 12
		<input type="checkbox"/> Robert Gross Summer Daze	<input type="checkbox"/> TEEN Summer Daze	
6	July 3- 7 <i>No camp July 4</i>	<input type="checkbox"/> McCambridge Summer Daze	<input type="checkbox"/> Verdugo Summer Daze	Monday, June 19
		<input type="checkbox"/> Robert Gross Summer Daze	<input type="checkbox"/> TEEN Summer Daze	
7	July 10 - 14	<input type="checkbox"/> McCambridge Summer Daze	<input type="checkbox"/> Verdugo Summer Daze	Monday, June 26
		<input type="checkbox"/> Robert Gross Summer Daze	<input type="checkbox"/> TEEN Summer Daze	
8	July 17 - 21	<input type="checkbox"/> McCambridge Summer Daze	<input type="checkbox"/> Verdugo Summer Daze	Monday, July 3
		<input type="checkbox"/> Robert Gross Summer Daze	<input type="checkbox"/> TEEN Summer Daze	
9	July 24 - 28	<input type="checkbox"/> McCambridge Summer Daze	<input type="checkbox"/> Verdugo Summer Daze	Monday, July 10
		<input type="checkbox"/> Robert Gross Summer Daze	<input type="checkbox"/> TEEN Summer Daze	
10	July 31 - August 4	<input type="checkbox"/> McCambridge Summer Daze	<input type="checkbox"/> Verdugo Summer Daze	Monday, July 17
		<input type="checkbox"/> Robert Gross Summer Daze	<input type="checkbox"/> TEEN Summer Daze	
11	August 7 - 11	<input type="checkbox"/> Robert Gross Summer Daze		Monday, July 24

Please state the reason for the request: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Parent Signature: \_\_\_\_\_

Email: \_\_\_\_\_

**For office use only:** Date Received: \_\_\_\_\_ Staff Initials: \_\_\_\_\_ Receipt: \_\_\_\_\_