



CITY OF LOS ANGELES DEPARTMENT OF RECREATION AND PARKS

**GRIFFITH PARK BOYS CAMP**



Payee Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

**PROGRAM ENROLLED IN:**

Participant's Name: \_\_\_\_\_ Receipt Number: \_\_\_\_\_

Additional Participants: \_\_\_\_\_

Mother/Son (October 25-27)

Father/Son (November 15-17)

**REASON FOR THE REFUND:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Full refunds are **only** issued when the Camp cancels the activity. All cancellations must be in writing. Refunds take 6-8 weeks, after request is received. Registration fee will be refunded as follows: minus \$20.00 per person with two (2) weeks or more notice; minus \$40.00 per person with less than two weeks notice. Cancellation deadline is 12:00 pm on the Thursday prior to the weekend registered for. There will be no refunds for **FAILURE TO SHOW**.

Payee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**OFFICE USE ONLY**

Date Processed: \_\_\_\_\_ Amount Refunded: \_\_\_\_\_

Comments: \_\_\_\_\_

Approved: \_\_\_\_\_