



# Program Refund Request

Member Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

## Program 1

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

Start Date: \_\_\_\_\_

Amount: \_\_\_\_\_

## Program 2

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

Start Date: \_\_\_\_\_

Amount: \_\_\_\_\_

## Program 3

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

Start Date: \_\_\_\_\_

Amount: \_\_\_\_\_

## Program 4

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

Start Date: \_\_\_\_\_

Amount: \_\_\_\_\_

Request Reason:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**Office Use**

Date Submitted: \_\_\_\_\_

MSC Report Attached: Yes      Sage Credit Note Attached: Yes

Class Status: \_\_\_\_\_

Refund: \_\_\_\_\_ - \_\_\_\_\_ = \_\_\_\_\_

Total Fees - Admin Fee = Cheq Amount

Approval:
Expense:
Allocation:
Invoice Inputted:
Chq Inputted:
Payment Date:
Chq Number:
Signer's Initials
Signer's Initials
Notes:

Payment Sent by: \_\_\_\_\_

Payment Sent date: \_\_\_\_\_