

REFUND REQUEST FORM

Please complete this form and e-mail it to club@renmoregymnastics.org or bring to Renmore Gymnastics Club at Unit 8 Racecourse Business Park, Parkmore, Galway.

Refunds are subject to the Club's Policy, Fees Policy and individual Camp Policies.

CONTACT INFORMATION
Name:
Address:
Contact Number:
E-mail:

REASON(S) FOR A REFUND
Please state the amount you wish to be refunded:

ORIGINAL PAYMENT INFORMATION
Purchased Item/Class/Course:
Name of Student (if applicable):
Amount Paid:
Date & Method of Payment:

Signature: _____ Date: _____

For office use only:

Date Request Form received: _____ Refund Approved: Yes / No

Amount Refunded: _____ Method: _____

Date of Refund: _____

Processed By: _____