

Child's Name			Date of Request:
orms may be	or refunds must be submi	ectly to the Recreation Ce	ting the Summer Camp Refund Request Form. enter or emailed to <a href="mailto:summerdaze@burbankca.gov">summerdaze@burbankca.gov</a> . <a href="mailto:summerdaze@burbankca.gov">summerdaze@burbankca.gov</a> .
	will be issued when reque	est is received at least 10 l	business days prior to the start of the week enrolled. No refu
		und fee per child will be o	applied regardless of reason for refund.
A refund	will not be issued for days	missed in a week. There	are no make-up days.
refunds m up to 6 w	nay take up to seven busi eeks to receive.	ness days depending on	ate received. After a refund has been issued, credit card your credit card company/bank and check refunds may take
	eposits and session camp camp, session balance, or	-	care fees) are non-transferable and may not be applied towo
		· =	refund request and \$20 fee per child, per week will applied.
Please check	the camp/session(s) you	would like to cancel.	
Session	Dates	Last Day to Request Refund	Camp Location
1	May 27 – 30 No camp May 26	Monday, May 12	
2	June 2 - 6	Monday, May 19	
3	June 9 - 13	Monday, May 26	
4	June 16 – 20 No camp June 19	Monday, June 2	
5	June 23 - 27	Monday, June 9	
6	June 30- July 3 No camp July 4	Monday, June 16	
7	July 7 - 11	Monday, June 23	
8	July 14 - 18	Monday, June 30	
	July 21 - 25	Monday, July 7	
9	July 28 - August 1	Monday, July 14	
9 10	301, 20 7, (09031 1		
	August 4 - 8	Monday, July 21	
10		Monday, July 21	

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

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