



CHEVIOT HILLS RECREATION CENTER

City of Los Angeles Dept. of Rec & Parks
2551 Motor Ave. Los Angeles, CA 90064
(310) 837-5186 cheviothills.recreationcenter@lacity.org



REQUEST FOR REFUND

REFUND POLICY:

After the Wednesday prior to the week of the activity beginning, no refunds will be issued unless the program is canceled by the Recreation Center. A 15% administrative fee will be assessed by the City of Los Angeles Department of Recreation and Parks for any patron granted a refund. All refund requests must be submitted by email or in person on a CHRC Refund Request form. There are no refunds or credits for missed days.

Additional fees may be charged for any uniforms or trophies ordered.

REFUNDS CAN TAKE UP TO 6-8 WEEKS.

IF YOU PAID WITH A CREDIT CARD, IT WILL BE REFUNDED TO YOUR CARD; IF YOU PAID WITH CHECK, A CHECK WILL BE MAILED TO THE ADDRESS BELOW.

PATRON/ACCOUNT HOLDER INFORMATION:

First Name: _____ Last Name: _____
Address: _____ City: _____ Zip: _____
Best Contact #: _____ Email: _____

REASON FOR REFUND:

- ACTIVITY CANCELLED BY RECREATION CENTER SCHEDULING CONFLICT PRACTICE CONFLICT
 ILLNESS/INJURY (DOCTOR'S NOTE REQUIRED FOR FULL REFUND) OTHER: _____

PATRON SIGNATURE: _____ DATE: _____

ACTIVITY INFORMATION:

PARTICIPANT NAME(S): _____
YEAR: _____ SESSION: WINTER SPRING SUMMER FALL
ACTIVITY TYPE: SPORTS LEAGUE CLASS CAMP OTHER:
ACTIVITY NAME/SPORT DIVISION: _____

FOR OFFICE USE ONLY:

Amount Paid: \$ _____ \$ _____ 15% Administration Fee
\$ _____ Other Fee(s): _____
\$ _____ (\$ _____ x _____ # of * _____ attended)
*classes, camp days, games, etc.
\$ _____ TOTAL REFUND
HHID: _____

(Staff) Received By: _____ Date: _____

RT#: _____ Date: _____ TW#: _____ Date: _____

Processed By: _____ Approved By: _____ Date: _____