



## Withdrawal/Transfer Request

South San Francisco Parks and Recreation Department - Aquatics  
1 W Orange Avenue, South San Francisco, CA 94080

### How to Submit a Form:

Please submit the **completed form** to Orange Pool at 1 W Orange Avenue in South San Francisco or email a completed digital copy to [web-rec@ssf.net](mailto:web-rec@ssf.net).

### Participant Information:

First Name:		Last Name:			
Home Address:		City:		Zip Code:	
Phone:		Cell Phone:			
Email Address:					

Please Check One*:	<input type="radio"/> Withdrawing	<input type="radio"/> Transferring
Please Check One*:	<input type="radio"/> Credit (Remain on CivicRec account)	<input type="radio"/> Check (mailed)
<b>*If left blank, any balance returned will default to a credit to remain on your CivicRec account.</b>		

### If Withdrawing:

Participant:		Class:		Session Code:	
Participant:		Class:		Session Code:	
<b>*Request Reason (If left blank, form will be returned):</b>					

### If Transferring:

Participant:		Class:		Session Code:	
Participant:		Class:		Session Code:	
<b>*Request Reason (If left blank, form will be returned):</b>					

### Refund Policy Acknowledgement:

- All refunds will be issued either as a check or account credit; note, refunds will not be processed back to credit cards. Please ensure your mailing address and account details are up to date to avoid delays.
- I understand that refunds must be requested one (1) week prior to the class start date and no refunds will be given after the first-class meeting besides class(es) cancelled by the Recreation Department. A service charge of \$10.00 PER CLASS will be made for all refunds requested by the participant.
- The \$2.25 processing fee that is charged at the time of registration per class is non-refundable.
- Please allow five weeks (5) for any refund to be processed.
- If a class is cancelled by the Department due to low enrollment or instructor availability, a full refund will be issued.
- All cancelations must be in writing.

*I acknowledge I have read and understood the contents of this form:*

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

#### Staff Only

Processed by: \_\_\_\_\_

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