



## Whitefish Parks and Recreation Department Refund Request Form

***Whitefish Parks and Recreation programs and facility rentals are non-refundable. However, under certain, extenuating circumstances, the City Manager may choose to offer a refund after consideration of this written request. All refund requests must be submitted within 30 days of cancellation.***

**I have read and understand the above refund policy of the City of Whitefish and submission of this document does not guarantee that a refund will be rewarded.**

Today's Date: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

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

Name of Program/Facility: \_\_\_\_\_

Program/Rental Start Date: \_\_\_\_\_

Refund Amount Requested: \_\_\_\_\_

Reason for Refund Request: \_\_\_\_\_

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

***Submit Completed Forms to [profficemgr@cityofwhitefish.gov](mailto:profficemgr@cityofwhitefish.gov)***

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**For Office Use Only**

Date Received by Office Manager: \_\_\_\_\_

Date Received by Recreation Coordinator: \_\_\_\_\_

Staff Comments: \_\_\_\_\_

\_\_\_\_\_

Date Received by City Manager: \_\_\_\_\_

City Manager Comments: \_\_\_\_\_

**Decision:** Full Refund \_\_\_\_\_ Pro-rate or credit \_\_\_\_\_ Request denied \_\_\_\_\_

Reason for denial: \_\_\_\_\_

Refund/Credit Amount: \$ \_\_\_\_\_ Revenue Account Number: \_\_\_\_\_

City Manager: \_\_\_\_\_

Signature

Date