



# REFUND REQUEST FORM

## 2019

All refund requests must be submitted in writing via the Refund Request Form. If the reason for cancellation is due to injury or illness, written documentation from the camper's physician must be provided. If the reason for cancellation is due to mandatory school event, written explanation from a school official (coach, principal or counselor) must be provided. Refunds will be processed according to form of payment. (If camp fees were paid by credit/debit card, the refund will be processed as a credit to the same card. If camp fees were paid by check, cash or money order, a check made payable to the original remitter will be mailed.)

All refund requests will be processed after June 6, 2019. **NO REFUND REQUESTS WILL BE ACCEPTED AFTER JUNE 20, 2018.**

### REFUND REQUESTS MAY BE SUBMITTED BY:

**MAIL:** PO Box 2220, Norman, OK, 73070

**FAX:** (405) 325-8455

**EMAIL:** RileyFootballCamp@gmail.com

(Please choose appropriate camp below.)

**High School Elite Camp I or II June 1 or June 8 (Grade 10-12)**

A \$10 cancellation fee will be assessed except in the case of injury, illness or mandatory school event. **If a cancellation is made for any other reason, tuition will be refunded less the \$10 cancellation fee if cancellation is made before the first day of camp.** ONCE THE CAMP SESSION HAS BEGUN THERE WILL BE NO REFUNDS, EXCEPT IN THE CASE OF INJURY OR ILLNESS. This includes the cancellation of practices due to severe weather. **The convenience fee associated with online registration is non-refundable.**

**Mid-High Camp: June 1-2 (Grade 7-9)**

A \$25 cancellation fee will be assessed except in the case of injury, illness or mandatory school event. **If a cancellation is made for any other reason, tuition will be refunded less the \$25 cancellation fee if cancellation is made before the first day of camp.** ONCE THE CAMP SESSION HAS BEGUN THERE WILL BE NO REFUNDS, EXCEPT IN THE CASE OF INJURY OR ILLNESS. This includes the cancellation of practices due to severe weather. **The convenience fee associated with online registration is non-refundable.**

**Lineman Academy (OL/DL): June 3 (Grades 9-12)**

A \$25 cancellation fee will be assessed except in the case of injury, illness or mandatory school event. **If a cancellation is made for any other reason, tuition will be refunded less the \$25 cancellation fee if cancellation is made before the first day of camp.** ONCE THE CAMP SESSION HAS BEGUN THERE WILL BE NO REFUNDS, EXCEPT IN THE CASE OF INJURY OR ILLNESS. This includes the cancellation of practices due to severe weather. **The convenience fee associated with online registration is non-refundable.**

**Youth Camp I and II: June 4-5 (Grades 3-6)**

A \$25 cancellation fee will be assessed except in the case of injury, illness or mandatory school event. **If a cancellation is made for any other reason, tuition will be refunded less the \$25 cancellation fee if cancellation is made before the first day of camp.** ONCE THE CAMP SESSION HAS BEGUN THERE WILL BE NO REFUNDS, EXCEPT IN THE CASE OF INJURY OR ILLNESS. This includes the cancellation of practices due to severe weather. **The convenience fee associated with online registration is non-refundable.**

**Specialist Camp: June 4 (Grade 10-12)**

A \$25 cancellation fee will be assessed except in the case of injury, illness or mandatory school event. **If a cancellation is made for any other reason, tuition will be refunded less the \$25 cancellation fee if cancellation is made before camp begins.** ONCE THE CAMP SESSION HAS BEGUN THERE WILL BE NO REFUNDS, EXCEPT IN THE CASE OF INJURY OR ILLNESS. This includes the cancellation of practices due to severe weather. **The convenience fee associated with online registration is non-refundable.**

**Camper Name:** \_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_

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

**City, State, Zip:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Reason for Cancellation:** \_\_\_\_\_

(Proper documentation must be provided with this form.)

**Parent/Guardian Signature:** \_\_\_\_\_

**OFFICE USE ONLY**

**Date Received:** \_\_\_\_\_

**Date Processed:** \_\_\_\_\_

**Refund Amount:** \_\_\_\_\_

**Refund by:** \_\_\_\_\_ **CC** **CK**