

PLEASE COMPLETE BOTH STEPS TO BE CONSIDERED FOR A REFUND

STEP #1: Send an email to staff@mpmscamps.org with your child's name and the dates you are going to request a refund.

STEP #2: Complete the following refund request form, which **must be postmarked August 1:**

MP&MS Summer Camp
Attn: Refund Requests
20 Magnolia Avenue
Larkspur, CA 94939

Please print out this web page information and mail it to the above listed address. Any incomplete refund requests (or requests received without this form) will be discarded and no refund will be issued. **Please complete one form per child.**

(REQUIRED) CHILD'S NAME: _____ and HOME PHONE: _____

(REQUIRED) PARENTS NAME: _____ and E-MAIL (please print) _____

(REQUIRED) ADDRESS WHERE WE SHOULD MAIL REFUND:

(REQUIRED) REQUESTING REFUND FOR: (specific dates)

(REQUIRED) REASON REQUESTING REFUND:

What do you feel we did well at camp?

How can we improve our program?

Do you plan on joining us again next summer? Definitely / Probably / Maybe / No

I have read and understood the refund policy as discussed on the original camp registration form and as described in detail at www.mpmscamps.org/contact. I understand that this form must be postmarked at least two weeks before the cancelled week or the form will be discarded upon receipt. I also recognize that any refund request postmarked after August 1 will not be opened and will be discarded. I understand that I will receive a confirmation email shortly after mailing this form. If, for whatever reason, I do not receive a confirmation email within 10 days, I understand that it is my responsibility to contact the camp staff immediately or I may not be eligible for a refund.

_____ / _____ / _____

(REQUIRED) Parent Signature

Today's Date
