



Medina Recreation Center  
 855 Weymouth Rd.  
 Medina, Ohio 44256  
 330-721-6900

**MCRC Refund/Transfer Request Form**

The MCRC maintains a NO REFUND POLICY. The completion of this form does not entitle you to a refund or transfer. Refund/transfer requests are handled on a case-by-case basis and will be reviewed by the MCRC Administrative Staff. Program refunds/transfers are for extenuating circumstances (medical reasons with a Doctor's note) and may be assessed a \$5 administrative processing fee. Membership refunds may be assessed a \$20 administrative processing fee. You will be notified of the status of your Refund/Transfer Request within 5-10 business days. If your request is denied, you may appeal this decision by submitting a written request for consideration to the Medina Board of Control, Office of the Mayor. Please Attach Doctor's note or verification of new address.

**Refund/Transfer Information**

**PROGRAMS**

Program Name: \_\_\_\_\_

Program Name: \_\_\_\_\_

**MEMBERSHIP**

Membership Type: \_\_\_\_\_

Date of Purchase: \_\_\_\_\_

**REFUND REQUEST AMOUNT**

Original Amount Paid: \_\_\_\_\_

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

Original Method of Payment:  Cash/Check

Mastercard/Visa/ Discover/ Amex

**REASON FOR REFUND REQUEST:**

\_\_\_\_\_

**Participant and Payee Information**

Participant Name: \_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Middle Initial

Payee Name: \_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Middle Initial

Payee Address: \_\_\_\_\_  
Street

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

Home Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Payee Signature: \_\_\_\_\_

**OFFICE USE ONLY**

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

Request Received By: \_\_\_\_\_

Administrative Staff Initials: \_\_\_\_\_

Approved  Not Approved

Amount Approved: \$ \_\_\_\_\_

Refund by:  Account Credit

Check

Credit Card

Payee Notified On: \_\_\_\_\_ By: \_\_\_\_\_

Entered in SportsMan By: \_\_\_\_\_

Processing Fee: \$ \_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_