



**REFUND OR CREDIT APPLICATION FORM**

**Name** \_\_\_\_\_

**Child Name** \_\_\_\_\_

**Years of Membership** \_\_\_\_\_

**Volunteer Hours** \_\_\_\_\_

**Reason for application (brief description).** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

You must be prepared to provide the following documentation to support this application.

1. This form signed and returned
2. Medical certificates if considered a part of this application

Have you received a copy of the Complaint Management Procedures?

Please circle YES or NO

Have you received a copy of the Payment, Refund and Late Payment Policy?

Please circle YES or NO

**Signed by** \_\_\_\_\_

**Full Name** \_\_\_\_\_

**Date** \_\_\_\_\_

Please return this document to reception or email to [info@mwgymclub.com](mailto:info@mwgymclub.com)