



SPEF

SOUTH PASADENA EDUCATIONAL FOUNDATION

REGISTRATION CHANGE FORM

- You can add classes and camps online. This form is for changes and refund requests.
- Only a parent or guardian can request a schedule change or refund.
- Once an enrollment is submitted, the refund policy applies.
- Contact SPEF (626) 441-5810 ext. 1163 with questions.
- Submit completed form to the SPEF Office 1020 El Centro St #3, South Pasadena, 91030.

CLASS CHANGES/SWAPS -= \$25 ADMIN FEE
 CLASS DROPS/CANCELTION =
 \$75 DEPOSIT FEE/CLASS OR CAMP

PLEASE PRINT CLEARLY

STUDENT LAST NAME	STUDENT FIRST NAME	DATE OF BIRTH	PHONE
NAME OF PARENT/GUARDIAN _____ <input type="checkbox"/> FATHER <input type="checkbox"/> MOTHER <input type="checkbox"/> GUARDIAN		PROGRAM <input type="checkbox"/> AFTERSCHOOL <input type="checkbox"/> 5TH GRADE MUSICAL <input type="checkbox"/> CAMP _____ <input type="checkbox"/> ELEMENTARY <input type="checkbox"/> INTERMEDIATE <input type="checkbox"/> HIGH SUMMER SCHOOL	
PARENT/GUARDIAN SIGNATURE		REASON FOR REQUEST	

CLASS/CAMP CHANGES

A \$25 FEE WILL BE CHARGED EACH TIME THERE ARE SCHEDULE CHANGES. FEES AND COST DIFFERENCES MUST BE PAID AT THE TIME THIS FORM IS SUBMITTED.

<u>DROP CLASS / CAMP:</u>	<u>COST</u>	<u>ADD CLASS / CAMP:</u>	<u>COST</u>	<u>OFFICE</u>
TOTAL \$:		NEW TOTAL \$:		
Total Difference			\$	

REFUNDS ARE PROCESSED ACCORDING TO THE FOLLOWING SCHEDULE.

NOTE: STUDENTS DISMISSED FOR DISCIPLINARY ACTION FOR SUMMER SCHOOL OR SUMMER CAMPS WILL NOT BE ELIGIBLE FOR ANY REFUND

REFUND POLICY - DATE FORM RECEIVED AT SPEF OFFICE THESE DATES ARE SPECIFIC TO SUMMER SCHOOL & CAMPS FOR AFTERSCHOOL PLEASE CALL THE OFFICE.		REFUND CALCULATION
MARCH 2 – MAY 12, 2017	CLASS CHANGE - REFUND MINUS \$25/CLASS ADMIN FEE CLASS CANCELLATION - REFUND MINUS \$75 DEPOSIT/ADMIN FEE	AMOUNT PAID FOR CLASSES OR CAMPS: \$ _____ LESS CHANGE ADMIN FEE (\$25/CLASS OR CAMP) \$ _____ OR LESS CHANGE CANCEL FEE (SEE TABLE FOR \$) \$ _____ AMOUNT TO REFUND = \$ _____
AFTER MAY 12, 2017	NO REFUNDS GRANTED EXCEPT FOR CHANGES DUE TO COLLEGE/CREDIT RECOVERY CLASSES	
STUDENT DROPPED FOR VERIFIED MEDICAL EMERGENCY	REFUND MINUS A \$75/CLASS OR CAMP ADMIN FEE	
COLLEGE/CREDIT RECOVERY ADJUSTMENTS	WE WILL MAKE THE CHANGE FOR NO ADMIN/CHANGE FEE	
CAMPS FROM SIGN-UP UNTIL 5 WEEKS PRIOR TO CAMP	CAMP CHANGE - REFUND MINUS \$25/CLASS ADMIN FEE CAMP CANCELLATION - REFUND MINUS \$100 DEPOSIT/ADMIN FEE	
CAMPS 5 WEEKS UNTIL CAMP START DATE	NO REFUNDS GRANTED	

PAYMENT DETAILS

PAYMENT RECEIVED BY Cash, Credit Card or Check # _____ (circle one)

MasterCard / Visa Number / AMEX*15 digits for AMEX CARD NUMBER: _____ - _____ - _____	EXP: (month / year) ____ / ____	SECURITY CCV: *(4 for AMEX) ____ - ____ - ____	OFFICE UPDATES: <input type="checkbox"/> EDIT REGISTRATION <input type="checkbox"/> ALLOCATE MONEY <input type="checkbox"/> CHARGE FEES <input type="checkbox"/> PROCESS REFUND IF NEEDED
Name of Cardholder as listed on card (please print clearly)	Signature of Cardholder:		