Anne Arundel County Department of Recreation and Parks

SCHOOL AGE CHILD CARE DIVISION
1 Harry Truman Parkway Suite 105 Annapolis, MD 21401
PHONE 410-222-7856/301-261-8036 FAX 410-222-4478
www.aacounty.org/recparks

WITHDRAWAL FROM SACC PROGRAM

PLEASE PRINT THE FOLLOWING INFORMATION AND RETURN TO THE SACC OFFICE.

Child's Name _____

Center _____

Withdraw from (please check): _____ AM _____ PM _____ Summer

Child's Last Day _____
Month Date Year

Reason for Withdraw (please check)

_____ No longer require service _____ Program dissatisfaction

_____ Moving out of area _____ Other

Refund Requested _____ Yes _____ No

SACC Withdrawal Policy
Written notification (completion of this form) is required when withdrawing your child from the program. If you have already made payment and are requesting a refund the following must be adhered to:

- A $25 processing fee will be assessed on all refunds
- 3 or more weeks notice given, a full refund minus the processing fee will be given
- Less than 3 weeks notice, an 80% refund will be given minus the processing fee.

Your refund will either be processed as a credit to your credit card account or you will receive a refund check from the Office of Budget and Finance.

Parent/Guardian Name (Print) Phone Number

_____
Address

_____
Parent/Guardian Signature Date

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OFFICE USE ONLY

DATE RECEIVED _____ APPROVAL DATE _____ REFUND AMOUNT _____

REFUND TYPE: CREDIT CARD _____ REFUND CHECK _____

RECEIPT # _____ DATE OF ORIGINAL TRANSACTION _____