Baldivis Secondary College

Excursion, Incursion and Camps Refunds Policy Guidelines

Rationale:

This policy is developed to provide and outline circumstances in determining eligibility for a full or part refund. The policy will ensure that the costs of excursions and camps do not incur direct costs to the college.

Guidelines:

- All requests for a refund must be made in writing.
- A request for a refund does not automatically equate to a part or full refund of monies paid.

Camps and Excursions:

- Students withdrawing from a camp, excursion or incursion will not automatically be entitled to a refund.
- A refund (less non-refundable deposit) will be paid to the parent/caregiver if the Principal deems the withdrawal from the activity is due to unavoidable circumstances such as illness or injury. Proof may be required, e.g. medical certificate.
- Where the college is charged a "group fee" as opposed to a "per head fee", a refund cannot be calculated until all costs associated with the activity have been met.

Request for Refund Process:

- Parent/caregiver is to complete a Request for Activity Refund Form and return to the College Finance Department.
- Additional documentation provided by the parent is to be attached to the request form, e.g. medical form.
- Finance Officer will determine the costs incurred by the school.
- Manager Corporate Services to approve/not approve refund.
- Parent/caregiver will be notified by a Finance Officer of decision.

REQUEST FOR REFUND FORM

Parent/Guardian Name: _____

Student Name: _____

Activity Name: _____

Activity Date: _____

Teacher's Name: _____

Reason for Refund:

_____

_____

_____

_____

_____

(Please attach Medical Certificate)

I understand and agree that:

A refund may not be made to me or be made in full or in part, having regard to the associated expenses already incurred by the school, and the school's refund guidelines.

I wish for my refund to be made by direct deposit into my bank account.

Account Name: _____

Account BSB: _____

Account Number: _____

Signature of
Parent/Caregiver: _____

Date: _____

Manager Approval

Name: _____

Signature: _____

Date: _____

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