



# REGISTRATION REFUND REQUEST FORM

To request a refund for an AWWOA course registration, please complete the form below and email to [training@awwoa.ca](mailto:training@awwoa.ca). All orders will be reviewed and processed accordingly.

## REGISTRANT INFORMATION:

Registrant Name: \_\_\_\_\_ Email: \_\_\_\_\_

Community/Employer: \_\_\_\_\_

1) Course Name: \_\_\_\_\_

Date of Course: \_\_\_\_\_

2) Course Name: \_\_\_\_\_

Date of Course: \_\_\_\_\_

Total Amount to be Refunded (including GST): \$ \_\_\_\_\_

REASON FOR REFUND REQUEST: \_\_\_\_\_

\_\_\_\_\_

## PAYMENT INFORMATION FOR CREDIT:

Please indicate your original payment method for your refund below.

*Credit Card refunds* – will only be issued back to the original card of payment.

*Purchase Order/Invoice refunds* – a credit cheque will be issued to the original issuer of payment.

## PLEASE SELECT YOUR ORIGINAL METHOD OF PAYMENT FOR YOUR REFUND:

### CREDIT CARD (VISA/MC)

NAME: \_\_\_\_\_  
(as it appears on the card)

CARD # \_\_\_\_\_ EXPIRY DATE \_\_\_\_/\_\_\_\_

BILLING EMAIL (if different than above): \_\_\_\_\_  
(Copy of receipt will be emailed)

### PURCHASE ORDER

INVOICE #: \_\_\_\_\_

CONFIRM MAILING ADDRESS FOR REFUND CHEQUE:

NAME or COMMUNITY/EMPLOYER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ PROVINCE: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_