REFUND REQUEST FORM

2020-2021 SKI CITY SUPER PASS

Refunds will be issued by check or credit card within (60) days of presentment of unused ticket stock or print vouchers which have not been activated (presented for one or more uses at any resort) under the following terms and conditions:

1) Ski City Super Pass refund requests must be presented on or before June 1 following the conclusion of the ski season for which the pass was issued.

2) Notwithstanding paragraph (1) above, refunds for activated Super Passes may be issued when: 1) both Cottonwood Canyons were closed for a full ski day during the dates the Super Pass was active, and the total number of ski days available on the Super Pass were not consumed; or 2) in the case of a debilitating injury or sickness to your guest and provided proof of same is evidenced in writing by a medical physician. Any refund requested under the conditions provided in (1) or (2) herein must be claimed within ten (10) business days of the occurrence.

CHOOSE ONE HOTEL EMPLOYEE if a hotel employee: name of Hotel			
OR hotel address CUSTOMER If a customer: NAME OF PURCHASER	CHOOSE ONE		
CUSTOMER If a customer: NAME OF PURCHASER	HOTEL EMPLOYEE	If a hotel employee:	name of Hotel
NAME OF PURCHASER EMAIL ADDRESS PHONE NUMBER STREET ADDRESS PAYMENT INFORMATION Today's Date: Original Purchase Date: Original Credit Card Number: or select for refund by check, for original purchase by check Number of Passes To Be Refui Original Refund Amount: \$ Total Refund Amount: \$ PASS INFORMATION Other (booking error or bulk order refund) Describe: PASS INFORMATION ENTER: PASS INFORMATION Orther Number OR Pass Numbers *REQUIRED* with subject line "refund" OR MAIL CARD(S) WITH THIS FORM TO: Visit Salt Lake / Ski City Attn: Mary Grimes 90 South West Temple		hotel ad	dress
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or select for refund by check, for original purchase by check Number of Passes To Be Refui Total Refund Amount: \$ REFUND REASON Medical Emergency - Documentation required, please include with form. Both Cottonwood Canyons were closed on (enter date). Other (booking error or bulk order refund) Describe: PASS INFORMATION FNTER:EMAIL FORM TO: tickets@visitsaltlake.com Voucher Number OR Pass Numbers *REQUIRED* with subject line "refund" OR MAIL CARD(S) WITH THIS FORM TO: Visit Salt Lake / Ski City Attn: Mary Grimes 90 South West Temple	Today's Date:		Original Purchase Date:
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