

Refund Claim Form

Guest Information:

Full Name: _____

Email Address: _____

Phone Number: _____

Reservation Details:

Booking No: _____

Check-in Date: _____

Check-out Date: _____

Reason for Refund Request:

Please describe the reason for your refund claim in detail. Include any relevant circumstances, issues, or concerns.

Refund Amount Requested:

Total Amount Paid: \$ _____

Amount Requested for Refund: \$ _____

Payment Method:

- Visa

- M-Pesa

- MasterCard: _____

Refund Processing Information:

Refund Method: Credit Back to Original Payment Method Bank Transfer Other (please specify): _____

Account Holder Name: _____

Card Number (if applicable): _____

Bank Name (if applicable): _____

Bank Address (if applicable): _____

Supporting Documents:

Please attach any relevant documents that support your refund claim. This may include photos, screenshots, or other evidence.

Declaration:

*By submitting this refund claim form, you acknowledge that you have read and understood our **refund policy**. You agree to provide accurate information and cooperate with our team during the investigation of your refund request. Kindly submit to info@sky-swift.com for review by our team.*

Guest's Signature: _____

Date: _____