

Support Fee Refund Request Form

Please print and submit to the club manager.

Membership Year: April 1, 20 to March 31,	
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membership fees.	lication, I (print name clearly) am making a request d of Directors for the return of my support fee of submitte (Full memberships: minimum of 24 hours to be completed by returning mbers. Summer specials: as per registration; minimum 8 hours or 12	d with my g members and
PLEASE NOTE:	Activities must be approved by a Club Official before considerat	ion for refund
Below is a detail	ed account of the project(s) and/or volunteer time completed an	d the dates:
Date of Activity	Details of Work Completed Including Name of Organizer	# of hours
Signed By:(Member Applying	Date:)	

Approved By: ______(Board Member, Committee Chair, Head Coach)