



Hebron Parks & Recreation

Mailing Address

Attn: Park and Rec
15 Gilead Street
Hebron, CT 06248

Office Address

Burnt Hill Park
148 East Street
Hebron, CT 06248

www.hebronct.com

Phone: 860-860-1281 Fax: 860-228-5912

Refund Request Form

The Refund Request Form is to be filled out in its entirety for each individual request. All forms should be returned to the Parks and Recreation Department in a timely manner via mail, e-mail, or in person. The Parks and Recreation Director will make the final decision on all requests.

Date of Request: _____

Participant's Name: _____

Contact Person: _____ Phone: _____ E-Mail: _____

Address: _____ Town: _____ Zip: _____

Program Name: _____

Program Dates: _____

Reason for Request: _____

The Parks and Recreation Department retains the right to amend the Refund Request Policy as deemed necessary for the success of programs, and for the betterment of our participants and the Town.

The signature below indicates that the requesting party has read and understands the Refund Request Policy as adopted by the Town of Hebron.

Name: _____ Signature: _____

Date: _____

Official Use Only

Received By: _____ Date: _____

Approved

Disapproved Reason for disapproval: _____

Program Fee: \$ _____

Refund Percentage: _____%

Total Refund: \$ _____

Parks and Recreation Director Signature: _____ Date: _____