

**Randolph Township Department of Parks, Recreation & Community Services**  
**502 Millbrook Avenue – Randolph, NJ 07869 – 973-989-7081**

**PROGRAM WITHDRAWAL REQUEST**

All refund requests must be made in writing and are subject to approval by the Director of Recreation in accordance with Township Ordinances. Approved refunds will be issued via voucher in 2-3 weeks or via credit on the participant's Community Pass account. All refunds / credits have a \$\$ processing fee, with the exception of any program canceled by Randolph Township. Please be sure to write legibly – if we need more information we will contact you. All requests will be honored in the following manner:

- **For Sports Programs – official start date is the day teams are formed. \*Not the day of first practice\***
- Criteria posted on Township Website and on your program registration receipt.
- If a program not listed on website or info not on receipt, the following criteria to be used:
  - Refund/Cancellations received 14 days prior to program/activity start date to receive a full refund; less processing fee.
  - Cancellations/Changes received 7-13 days prior to program/activity start date are eligible for a 50% refund, less processing fee.
  - Cancellations/Changes made less than seven (7) days prior to the program dates are not eligible for a refund.
- A processing fee will be charged for all approved changes or refunds.
- Email completed form to [shemmes@randolphnj.org](mailto:shemmes@randolphnj.org) or mail to address above.

Participant's Name	Parent/Guardian Name	
Street Address	City	Zip
Home Phone	Cell Phone	Email Address

Program(s) to be refunded (be specific): \_\_\_\_\_

\_\_\_\_\_ Start Date of Program: \_\_\_\_\_

Program Fees Paid: \_\_\_\_\_ Date of Refund Request: \_\_\_\_\_ Date Registered: \_\_\_\_\_

Please Select:   ☐   I would like my Community Pass account credited. (\$10 processing fee)  
                         ☐   I would like to be issued a check after completing the voucher process. (\$30 processing fee)

Reason for Refund: Please attach additional documents as necessary. \_\_\_\_\_

\_\_\_\_\_

**For Office Use Only:**

☐ **Approved**   ☐ **Denied**

Amount to be Refunded	\$
Processing Fee	\$
Total Refund	\$

Date Withdrawn: \_\_\_\_\_ Date Voucher Mailed \_\_\_\_\_ Date Signed Voucher Rcv'd \_\_\_\_\_