





# East Hanover Soccer Club

## Refund Request for the 2009 Recreation Program

We (I) certify that to the best of my knowledge the above information is true and accurate.

**X** \_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

PLEASE RETURN THE COMPLETED FORM IN A SEALED ENVELOPE, MARKED

“ATTENTION: East Hanover Soccer Club President” to the Recreation Department

Or

MAIL IT DIRECTLY TO:

President  
East Hanover Soccer Club  
PO Box 212  
East Hanover, NJ 07936

**DO NOT WRITE IN THIS SPACE  
FOR EHSC BOARD USE ONLY**

Refund Request Received on date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Refund Request Approved: \_\_\_\_\_

Request Denied \_\_\_\_\_

Amount Requested \$ \_\_\_\_\_

Multiplayer Discount Subtracted (if any) \$ \_\_\_\_\_

Amount Approved \$ \_\_\_\_\_

**X** \_\_\_\_\_  
East Hanover Soccer Club  
President

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date