

**FAIRBANKS NORTH STAR BOROUGH
PARKS & RECREATION DEPARTMENT
REQUEST FOR REFUND**

PARTY REQUESTING REFUND:

DATE: ___/___/___

NAME: _____

(The name listed above must be identical to the name on the original receipt).

PHYSICAL ADDRESS: _____

MAILING ADDRESS: _____

TELEPHONE: _____

RECEIPT#: _____ AMOUNT OF REQUEST: _____

FACILITY: _____

REASON FOR REQUEST: _____

SIGNATURE: _____

RECEIVED BY: _____

REQUEST:

APPROVED: _____

DENIED: _____

DATE: _____

SIGNED: _____

Director or Designee, Parks & Recreation