

Co-op Fee Refund Application

Name _____

Class Letter _____ Today's Date _____

Address where refund check should be sent:

If you would like, please share your reason for dropping the class.

If you are mailing this form, make sure it is postmarked by the refund date to ensure your eligibility for a refund. Refund dates for the current quarter are posted at the school.

If you are hand delivering this form, please have your teacher sign and date it.

Turn this form into the Treasurer's box located above the library.
We hope you enjoyed your experience with the **Redmond Toddler Group!**