



VOLUNTEER REBATE FORM

This form is needed to obtain a \$30 rebate/refund of your Tarpon FC volunteer fee, which was paid at registration, in exchange for performing 5 hours of volunteer service for Tarpon FC.

Form must be signed (at bottom) by our Volunteer Coordinator - Tresa Watson or Concession Manager - Susan Oliveira.

Player Name: _____ Age Group: _____

Job Performed: Coach Asst Coach Team Mgr Concession Apparel Sales

If Concession or Apparel - Dates and Time Performed:

PLEASE PROVIDE MAILING ADDRESS TO WHICH YOU WOULD LIKE THE VOLUNTEER REBATE MAILED:

PLEASE MAIL THIS FORM TO THE FOLLOWING ADDRESS:

**TARPON FC
P.O. BOX 848
TARPON SPRINGS, FL 34688**

For all volunteer rebate forms received, rebate checks will be mailed within 30 days of the date received. All submissions must be postmarked by February 13, 2011. Please contact Tresa Watson at volunteer@tarpnfc.com if you have any questions.

Authorized Signature: _____

Printed name of authorized person: _____