



Highlands Recreation District

1851 Lexington Avenue • San Mateo, CA 94402

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www.highlandsrec.ca.gov

"A Community Place to Learn, Grow & Play"

Covid-19 Cancellation Form

Name: _____

Two options have been presented to HRD participants. I am choosing the choice indicated with an X mark. Please complete the attached fillable PDF and return by 4/30/20. Please submit this form to admin@highlandsrec.ca.gov.

I would like to receive a credit for the cancelled classes listed below.

1. Program: _____ Participant Name: _____
2. Program: _____ Participant Name: _____
3. Program: _____ Participant Name: _____
4. Program: _____ Participant Name: _____
5. Program: _____ Participant Name: _____

I would like to forgo a credit for the cancelled classes listed below.

6. Program: _____ Participant Name: _____
7. Program: _____ Participant Name: _____
8. Program: _____ Participant Name: _____
9. Program: _____ Participant Name: _____
10. Program: _____ Participant Name: _____

Signature

Printed Name

Date