	cellation/Chang	King's Bend Lodge Je Request Form re. – Pittsford, 14534 – 248-6280	
PLEASE PRINT CLEARLY			
Make Check Payable To:	Phone #:		
Mailing Address:			
Town:	Zip Code:		
Email:			
CAN	ICELLATION/REFUND POLI	СҮ	
Cancellation requests must be given 5 business cancellation fee will be mailed to the applicant w refund of the reservation fee.			
Please initial	to confirm that you have read and un	derstand the above Policies.	
1) Reservation Date:	North	Lodge: South Lodge:	
Reason for Cancellation:			
CHA	NGE IN RESERVATION POL	ICY	
Requests for a change to the reservation must be processing fee will be charged. Weather or othe applicant will be notified and the reservation fee	r conditions may require the town		
Please initial	to confirm that you have read and un	derstand the above Policies.	
2) Original Reservation Date:	North	Lodge: South Lodge:	
Reservation Change Date:	North	Lodge: South Lodge:	
	(OFFICE USE ONLY)		
DATE R	ECEIVED:		
1) Amount Paid:	Processing Fee:	Refund:	
2) Amount Paid:	Processing Fee:	Refund:	

2) Amount Paid:	Processing Fee:	Refund:
Receipt #:	Refund Total:	
Recreation Director:	KBP Supervisor:	