



Conference for Food Protection

Cancellation, Refund, and Transfer Policy

Requests for refunds or transfers must be submitted using the form below.

Cancellations and Refunds: Each registrant seeking a cancellation or refund for the Biennial Meeting or Workshop will be charged a \$100 administrative processing fee. An additional \$100 will be retained from Biennial Meeting refunds for CFP membership dues for the upcoming biennium (membership valid until the day before the start of the next biennial meeting).

Refund requests that seek a waiver of the above charges must be submitted to and approved by the Executive Director and Conference Chair.

Registration Transfers: A registration may be transferred to another individual; however, once a registrant initiates participation in either the Workshop OR the Biennial Meeting, a transfer will NOT be approved. Any Biennial Meeting transfer includes the transfer of CFP membership to the new registrant.

Refund / Transfer Request Form

Please complete a separate request for each registrant.

Date of request: _____ **This is a request for:** Refund Registration Transfer

Person making this request:

First Name: _____ Last Name: _____
Daytime phone: _____ Email: _____
Employer: _____

REFUND requested for the following registrant: Same as person making this request; see above

First Name: _____ Last Name: _____
Daytime phone: _____ Email: _____
Employer: _____

Requested amount of refund: \$ _____ Reason for refund request: _____

TRANSFER registration **FROM** the following individual: Same as person making this request; see above

First Name: _____ Last Name: _____
Daytime phone: _____ Email: _____
Employer: _____

TRANSFER that registration **TO** the following individual:

First Name: _____ Last Name: _____
Daytime phone: _____ Email: _____
Employer: _____

SUBMIT this completed request form to the Cliff Nutt, CFP Executive Treasurer: cnutt.cfp@gmail.com

CFP Office Use Only

Approved. Date: _____ Refund processed Credit Card Check
Denied. Date: _____ Total Amount of Refund: _____
Reason for approval or denial: _____

Response provided to requestor by: _____ Date: _____