



# Refund Request

Date Requested \_\_\_\_\_ Sport \_\_\_\_\_

Person Requesting Refund \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone \_\_\_\_\_

Child's Name \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_ Coach \_\_\_\_\_

Reason for the Refund Request? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Shirt or Jersey Received?     Yes     No

If yes, was the Shirt or Jersey Returned?     Yes     No

Original Form of Payment

- Cash
- Check
- Money Order
- By Credit Card at the office or over the telephone
- Online payment by credit card      Invoice # \_\_\_\_\_

Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Did you receive financial assistance or use a voucher for any of this fee?     Yes     No

If yes, what was the total value of the financial assistance and/or voucher?    \$ \_\_\_\_\_

Printed name of person requesting this refund \_\_\_\_\_

Signature of person requesting this refund \_\_\_\_\_

**For Office Use Only Below:**

Amt. Paid \$ \_\_\_\_\_      Grant/Fin. Asst. Amt. \$ \_\_\_\_\_      Amt. Refunded \$ \_\_\_\_\_

Staff Initials \_\_\_\_\_