



NORTH SIMCOE GIRLS HOCKEY ASSOCIATION PLAYER REFUND REQUEST FORM

Date of Request: _____ Current Team: _____

Coach: _____

Player Name: _____ Phone: _____

Address: _____

I, _____ of the _____ team, am formally requesting a player refund. I understand that all rep fees paid to date are NON-REFUNDABLE and registration refunds and amounts will be distributed per Refund Schedule and the NSGHA reserves the right to deem refund amount(s) as per refund policy schedule.

Refund Schedule

House League Players: Withdrawal before September 1st \$50 deducted; September 1st to September 30th \$100 deducted; October 1st to October 31st \$150 deducted; November 1st-Before December 31st \$250 deducted; December 31st and beyond No refund.

Rep Players: After signing but before September 1st 25% registration fees deducted; September 1st to October 31st 50% registration fees deducted; After November 1st No Refund - Rep Fees Non-Refundable.

Reason for refund request: _____

NSGHA reserves the right to approve refunds accordingly. In the case of rep teams, additional penalties may be applied as that team's overall budget dramatically changes and the coach is unable to fill vacant spots on the team to recoup any shortages. I hereby understand the refund amount will be decided and granted by the NSGHA executive at a monthly meeting. I also understand, player releases are not granted after October 31. No refunds will be issued if any outstanding team equipment or jerseys are not returned to the coach.

Player/Parent Name (Please Print)

Player/Parent Signature

For NSGHA Use Only:

Registration Amount Refund Request Type: Rep _____ HL _____ Date Received: _____

Paid: \$ _____ Registration/Amount Paid to date: \$ _____ Release Enclosed: YES _____ NO _____

Date Cheque Sent: _____ Refund Amount Approved: \$ _____

** PLEASE MAKE 2 COPIES OF THIS DOCUMENT ** 1-Treasurer/1-Registrar