

**AYSO REGION 91
PLAYER REFUND REQUEST POLICY**

A **WRITTEN REQUEST (NO EXCEPTIONS)** for a Player Refund must be made via US mail **ONLY**. There will be no verbal or e-mail requests for refunds accepted. The request must **CLEARLY** state the players name and age, reason for withdrawal and address to which refund should be mailed. All refunds are based on the postmarked date. Any team uniform received must be returned to the league. The refund check will be made out to the person who signed the registration form.

Refunds will only be honored with: The Registration Receipt, a completed Refund Form and a pre-stamped postage paid envelope for return of refund. Please note the \$20.00 AYSO National Fee is **NONREFUNDABLE!**

Players in Divisions: U16, U19 Postmarked before **July 1st**
Players in Divisions: U5, U6, U8, U10, U12, U14 Postmarked before **August 15th**.

Registration Fees Less \$20.00 processing fee, less \$20 National Fee.
Less \$25.00 uniform fee. (\$25.00 will be included in refund if a new unused uniform has been returned)
Refund request postmarked after dates stated above will receive **NO REFUND**.

Refunds may take up to 2 weeks to process
. Mail refund requests to:

**AYSO Region 91 – League Player Refund Request
P.O. Box 6733 Lancaster, CA 93539-6733
(661) 418-2344**

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AYSO REGION 91 LEAGUE PLAYER REFUND REQUEST

Player(s) Name: 1. _____ Coach(s) name: _____

League Team Div: ____ Uniform Received: Yes ____ No ____ If yes, Jersey Number: ____

Player(s) Name: 2. _____ Coach(s) name: _____

League Team Div: ____ Uniform Received: Yes ____ No ____ If yes, Jersey Number: ____

My Child(ren) will not be able to participate in the AYSO Region 91 League Play previously paid for due the following Reason:

Person Requesting Refund: _____ Phone #: _____

Please Mail my refund to: _____

FOR OFFICE USE ONLY

Postmarked (if applicable): _____ Date Processed: _____ Check # _____ Total

Refunded: _____ Letter sent: _____

