## MIRA MESA SOCCER - AYSO REGION 285 REFUND REQUEST FORM

AYSO Region 285 allows for refunds under special circumstances. All refund requests must be submitted in writing using this form and must include the reason(s) and/or circumstance(s). All refund requests will be read and considered by the Regional Board at the next monthly meeting upon receipt of refund request and refunds will only be granted at the discretion of the Regional Board.

## Guidelines:

- 1. Any player who withdraws prior to participating in the first game or practice of the season may be considered for a full refund of their registration fee.
- 2. Any player who withdraws after participating in the first practice, but prior to the first game of the season, may be considered for a refund of the registration fee, minus any nonrefundable AYSO National Registration Fees for insurance already paid by Region 285.
- 3. Any player who withdraws after participating in the first game of the season or beyond will not be entitled to a refund of the registration fee.
- 4. A fee will be assessed for a uniform that is not returned in clean and unused condition.

## **Procedure:**

Parent/Guardian Name

- 1. The parent/guardian requesting the refund must complete, sign and mail this form to the address below. DO NOT GIVE TO THE COACH this request is the responsibility of the parent/guardian and is to be submitted to the Regional Board.
- 2. This request must be submitted by October 1 for the Fall Season or April 1 for the Spring Season in which the refund is being requested.
- 3. Refunds will not be carried over from season to season and will not be applied toward the registration fees of a following season.
- 4. Please allow 4 weeks for a refund (if approved) to be processed.

## TO BE FILLED OUT BY THE PARENT/GUARDIAN:

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	City	City		
I did not receive the I am returning the A My child has used th I am waiving my rec	named above be dropped from further p AYSO uniform YSO uniform, clean and unused he AYSO uniform and/or we would li quest for a refund; I will donate my r d to support families in our commur	ke to keep the uniform efund to the AYSO Regio	on 285 Scholars	hip Program.
I am requesting a re Reason for Drop (Use a separate				
Parent/Guardian Signature:Pl	ease mail to: AYSO Region 285, P.O. B	Date:ox 26507, San Diego, CA	92126	
	BOARD USE C	NLY		
Original Registration Fee Paid: _	\$	Refund Approved:	YES	NO
Approved Refund:\$		RC Signature:		
Data	Chack #	Issued /Notes		