

Refund Request Form

YAGUARS SPORTS AND SOCIAL CLUB INC.

info@yaguars.org - www.yaguars.org

Player Information

(please print clearly and fill in ALL SECTIONS, failure to complete fully will delay your refund)

Last name	 First	First Name		
	30			1:1/1
Address:Street/City/Posta	al Codo			
		Calli		
Telephone:				
Email				
Parent/Guardian Name	Last	First		
Did you register online? Y	es No	(please check one)		
Reason for Refund:				
Amount of Payment:		Method of Payment: _		
Signature:				
Date				
For Club Officials Only				
Refund Amount \$				
Registrars Signature:				
Refund Issued by:				
Date:				

*Note: A \$25 administration fee will apply to all refunds.