

FLYING ANGELS TRACK CLUB REFUND REQUEST FORM

Complete and email this form to Track@flyingangels.ca
(PLEASE PRINT)

Parent / Guardian Information

First Name:	Last Name:
Street Address:	Apt/Unit #:
City/Town:	Postal Code:
Telephone:	Email Address:

Participant Information

Last Name:	First Name:	Birth Date: (DD/MM/YYYY)	Gender: M / F
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Program / Activity Information

Program/Activity Name	Location	Number of Practices Attended

Amount Paid & Reason for Refund

(Please Print)

Refund Request Forms will be processed in accordance to the refund policy outlined below. Once approved, please allow up to 6 weeks for refund processing. Submission of a form does not guarantee that a refund will be issued, **Refunds will be first applied to any outstanding balance owed for programs or activities.** If there is no outstanding balance, the refund will be made by cheque or credit card based upon the method of payment used at the time of registration. Refund requests will not be handled by phone.

REFUND POLICY

- Athletes may request a refund up to 14 days after registering with the team.
- There is a \$50 administration fee applied to all refund requests.
- The \$25 try-a-session fee will be applied for each day the athlete participated in a training session prior to requesting the refund.
- There are no refunds given for uniforms received by the athlete.
- There are no refunds for facility fees.
- All refund requests must be made using the club's Refund Request Form
- Refunds may take up to 6 weeks to process after Refund Request Form is received.

I acknowledge that I have read and understand the Refund Policy outlined above.

Client Signature: _____

Date: _____ *

REFUND INFORMATION

FOR OFFICE USE ONLY

Date Received: ____ / ____ / ____ (dd/mm/yy)	Refund Given: \$	Date Processed: ____ / ____ / ____ (dd/mm/yy)
Received By:	Processed By:	Refund Chq #