

## **B.C. INDOOR SOCCER LEAGUE SOCIETY**

Website: www.bcisl.com Email: admin@bcisl.com

## REGISTRATION REFUND REQUEST FORM

All refunds regarding team or player registration fees, or performance bonds, will be handled by the BCISL Board of Directors.

Managers or players requesting a refund shall submit such requests to the League Administrator in writing. Refunds will only be considered for medical reasons or such other special circumstances that the BCISL Board of Directors deems appropriate. Requests for refunds may or may not be approved. The BCISL Board of Directors reserves the right to refuse a refund request for any reason.

Approved refunds will be pro-rated based on the number of games remaining unplayed in the season, less a non-refundable \$25 administration fee, and a \$5 insurance fee. No refunds shall be considered after January 15th of the current season.

| PLAYER NAME:              |           |              |  |
|---------------------------|-----------|--------------|--|
| ADDRESS:                  |           |              |  |
| CITY:                     | PROVINCE: | POSTAL CODE: |  |
| TELEPHONE:                |           | E-MAIL:      |  |
| TEAM NAME:                |           |              |  |
| DATE OF LAST GAME PLAYED: |           |              |  |
| REASON FOR REQUEST:       |           |              |  |
|                           |           |              |  |
|                           |           |              |  |
|                           |           |              |  |
|                           |           |              |  |
|                           |           |              |  |
|                           |           |              |  |
| SIGNATURE:                |           | DATE:        |  |