

# Appendix B

## **SMSA Registration Refund Policy 2015**

The Strathroy-Caradoc Minor Soccer Association will refund registration fees as explained in Appendix B of this policy and will consider refund requests not meeting Appendix B, but deemed a special circumstance.

1. Registration refund requests must be forwarded, **in writing**, to the Strathroy - Caradoc Minor Soccer Association's Registrar. A Copy of the form is below.
2. If received, the Uniform must be returned to the Registrar before a refund will be considered.
3. If the registration refund request is not considered a special circumstance, the Registrar will approve the registration refund based on Appendix B and forward the necessary information to the Treasurer.
4. If the registration refund request does not meet Appendix B and is determined to be a special circumstance, the registrar will forward the request to the Board of Directors of the SMSA. The decision of the Board of Directors will be final and without precedent.

### **Registration Refund Structure 2015 - January 24 - March 15**

<b># OF SMSA PLAYERS</b>	<b>1 PLAYER</b>	<b>2 PLAYERS</b>	<b>3 PLAYERS [*]</b>	<b>4PLAYERS [*]</b>
<b>Basic Fee</b>	\$150.00	\$ 300.00	\$ 400.00	\$ 500.00
<b>Administrative Fee [**]</b>	\$ 30.00	\$ 60.00	\$ 90.00	\$ 120.00
[*] Discounted registration fee	\$120.00	\$ 220.00	\$ 310.00	\$ 380.00
[**] Non-refundable				

# Appendix B

## Registration Refund Structure 2015 - March 16 - May 2

# OF SMSA PLAYERS	1 PLAYER	2 PLAYERS	3 PLAYERS	4 PLAYERS
<b>Basic Fee</b>	\$ 150.00	\$300.00	\$400.00 [*]	\$500.00 [*]
<b>Administrative Fee [**]</b>	\$ 50.00	\$100.00	\$150.00	\$200.00
<b>Amount of Refund</b>	\$ 100.00	\$200.00	\$250.00	\$300.00

[\*] Discounted registration fee

[\*\*] Non-refundable

## Registration Refund Structure 2015 - After May 2

# OF SMSA PLAYERS	1 PLAYER	2 PLAYERS	3 PLAYERS	4 PLAYERS
<b>Basic Fee</b>	\$ 150.00	\$ 300.00	\$ 400.00 [*]	\$ 500.00 [*]
<b>Administrative Fee [**]</b>	\$ 105.00	\$ 220.00	\$ 315.00	\$ 410.00
<b>Amount of Refund</b>	\$ 45.00	\$ 80.00	\$ 85.00	\$ 90.00

[\*] Discounted registration fee

[\*\*] Non-refundable

# Appendix B

PLAYER INFORMATION											
Date:					Team Name:						
Last Name:											
First Name:					Male			Female			
Division:	U4	U5	U6	U8	U10	U12	U14	U16	U18	Adult	
PARENT/GUARDIAN INFORMATION : Cheque payable to											
Last Name:											
First Name:					Phone:						
Address:											
Town:					Postal Code:						
Valid Email Address:											
Would you like your cheque mailed?				Yes	No	Please hold for pick up:				Yes	No
REASON FOR REFUND REQUEST: <i>(more space on the back of this form)</i>											
ACKNOWLEDGEMENT: I have read and understand the SMSA Refund Policy.											
Parent / Guardians Name					Parent / Guardians Signature						

<b>Office use only:</b>	
Copy of Registration Form Attached: Yes or No	
Coach Notified: Yes or No	
Original Payment Method: CHEQUE CASH CREDIT	
Original Payment Amount: \$ _____	
Date Refund Cheque Issued: _____ Refund amount: \$ _____ Cheque # _____	
Approved by: _____ Refund recorded in Registration System By: _____	