**BARRIE WOMEN’S HOCKEY ASSOCIATION - REFUND REQUEST FORM**

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| DATE OF REQUEST: |  | TEAM NAME: |  | |
| PLAYER NAME: |  | PARENT NAME: |  | |
| ADDRESS: |  |  | |  |
| EMAIL: |  | PHONE: |  | |

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ am formally requesting a refund. I understand that registration refunds and amounts may be distributed per the refund schedule and that BWHA reserves the right to determine final refund amounts as per the refund policy. Non-Resident Fee is non-refundable.

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| HOUSE LEAGUE | |
| REFUND REQUEST | REFUND AMOUNT |
| Prior to September 15th | Full refund less $50 administration fee\* |
| September 15th to November 15th | Full refund less $300 administration fee\* |
| After November 15th | No refund |
| ADULT WOMEN’S HOUSE LEAGUE | |
| REFUND REQUEST | REFUND AMOUNT |
| Prior to November 1st | Full refund less $100 administration fee\* |
| November 1st to January 15th | Full refund less $250 administration fee\* |
| After January 15th | No refund |
| COMPETITIVE | |
| REFUND REQUEST | REFUND AMOUNT |
| Prior to September 1st | Full refund less $450 administration fee\* |
| After September 1st | No refund |
| BWHA DEVELOPMENT PROGRAM | |
| REFUND REQUEST | REFUND AMOUNT |
| Prior to start of the development program | Full refund less $25 administration fee\* |
| Following the start of the development program or later | No refund |

\*Non-refundable administration fee includes OWHA registration, Hockey Canada Insurance, and BWHA administration costs

REASON FOR REFUND REQUEST

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*BWHA reserves the right to approve refunds accordingly, I hereby understand any refund amount will be decided and granted by BWHA as required.* Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_