

North Utah County Soccer Refund Request Form

Instructions: ALL MUST be followed

-Fill out form completely

-Send to League President

(note it may take up to one month to receive refund after sending as we need multiple signatures on checks and the league treasurer will send the check to the address you give us.)

Date: ___/___/___

Player Name: _____ Parent Name: _____

Address: _____ Zip: _____

City: _____ Phone: _____

E-Mail Address _____

Refund Amount: \$ _____

Please note that a full refund may not be granted but we will try. If we haven't had out of pocket expenses related to your child you may receive the full amount. For example, a request after the season has begun will be especially reduced. You may be receive a credit on your credit on your credit card instead of a check if the request is within 90 days of the registration.

Reason for refund: (please specify the current age group, and coach name if those are known)

- Moving. Age Group _____ Coach Name _____
- Child no longer wants to play. Age Group _____ Coach Name _____
- Moving from District(AA) to State (AAA) Age Group _____ Coach Name _____
- Other(explain) _____
- _____

Send to: NUCS President, P.O. Box 1142, Pleasant Grove, Ut. 84062

OR email to president@northutahcountysoccer.com

League President Approval

Yes / No Signature: _____

Treasurer Use Only

Date Check Issued: ___/___/___ Check # _____ or CC Credit _____

