



**Request for Refund**

**Customer:** \_\_\_\_\_

**Athlete:** \_\_\_\_\_

**Main Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Mailing Address:**

**Amount Requested (as paid):** \_\_\_\_\_

I hereby understand that I may be issued a refund for registration fees to Thunder Bay Gymnastics Association, less \$55 (Gymnastics Ontario fee and Administration fee).

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

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**(OFFICE USE ONLY)**

**Date Submitted:** \_\_\_\_\_

**Reason for Refund:** \_\_\_\_\_

**Processed in ITSN:** \_\_\_\_\_

**Cheque Number:** \_\_\_\_\_

**Cheque Delivered:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Signature:** \_\_\_\_\_