



**REFUND REQUEST FORM**

Name of Parent/Guardian: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

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

Name of Player: \_\_\_\_\_

Age Group: \_\_\_\_\_ Name of Team's Community: \_\_\_\_\_

Reason for Refund Request – Please circle below:

1. Covid-19 Financial Restraint.
2. Worried about physical well being and do not wish to participate in outdoor.
3. Recognize playing will be in the month of July/August and can not commit to those months.
4. Uncertainty surrounding start date.
5. Other – please specify \_\_\_\_\_

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**\*Please note that once you have withdrawn your registration and received a refund ESESA is not able to guarantee you a spot in the Outdoor Season delayed start.**

Original Form of Payment: \_\_\_\_\_ Date of Payment: \_\_\_\_\_

Refunds requests will be reviewed and are subject to refund policy of Edmonton Southeast Soccer Association.

Please email the completed form to: [admin@southeastssoccer.ca](mailto:admin@southeastssoccer.ca)