

Child's Name \_\_\_\_\_

Parent/Guardian's Name \_\_\_\_\_



## EASTLAKE YOUTH FOOTBALL AND CHEER REFUND POLICY

Request For Refund letters will be considered **ONLY FOR MEDICAL REASONS**. A written signed **PHYSICIAN'S STATEMENT MUST** accompany the Refund Request letter. The Physician's contact phone number must also accompany this request.

### **ABSOLUTELY NO REFUNDS OTHER THAN FOR MEDICAL REASONS**

Refunds are prorated as follows:

Prior to and during the conditioning period: 100% of registration fee, less \$50 Administrative fee\*.

First month of regular season: 50% of registration fee, less \$50 Administrative fee\*.

**NO REFUNDS WILL BE GIVEN FOR ANY REASON AFTER THE 4TH GAME OF THE REGULAR SEASON.**

**ABSOLUTELY NO REFUNDS ON CHEER UNIFORMS.**

**REFUNDS WILL BE PROCESSED WITHIN 4 WEEKS AFTER SUBMISSION.**

Date of Submission shall be determined as to the date received by the Treasurer.

\* Administrative fees are required for any one of the following reasons:

- a. Notification of Non-participation received AFTER the 5th day of conditioning , preventing the sign-up of a child on the wait list, resulting in loss of revenue benefits to the Association members.
- b. Additional document preparation, processing, handling, securing, and notification.
- c. Additional Insurance Assessment by San Diego Youth Football and Cheer Conference.
- d. Purchase of additional football uniform individually sized for that particular player

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

This signed copy is to be given to the Treasurer for record keeping purposes.

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