



PLAYER DROP / REFUND REQUEST FORM

**Please allow 4-6 weeks
for your refund to be
processed.**

I am withdrawing the following child from Ojai AYSO Region 147:

NAME: _____

DATE OF BIRTH: _____

CHECK THE APPROPRIATE BOX:

___ I am returning the AYSO uniform, clean, unused, and intact.

___ I will keep the AYSO uniform.

___ I did not receive the AYSO uniform.

___ I am waiving my request for a refund - Donate my refund towards the scholarship fund.

___ I am requesting a refund for my child - mail the refund to:

NAME: _____

STREET ADDRESS: _____

CITY, STATE, ZIP: _____

HOME PHONE: _____

CELL PHONE: _____

SIGNATURE: _____

DATE: _____

OFFICE USE ONLY

Date Form Recd: _____

Amount Refunded: _____

Copy to Database: _____

Check #: _____

Copy to Treasurer: _____

Refund check mailed on: _____

Copy to Regional Commissioner: _____

Player Removed from DB: _____

Remarks _____