

Request for Withdrawal And Refund

On or before November 14th: 75% refund, minus \$45 Skate Canada Fee

After November 14th: No Refund (unless we are forced to close)

| Skaters name: |
|---|
| Date of birth: |
| Telephone number: |
| Email address: |
| Refund requested by: |
| Mailing address street: |
| Town: |
| Postal Code: |
| Original method of payment: |
| Reason for request: |
| Please note: By submitting this form, the Clinton Skating Club will consider this your official withdrawal from our Association for the current season. Your child player will be immediately removed from our registration and may not have the ability to return this season. |
| Agreeing to these terms is mandatory for the Clinton Skating Club to continue with your request. |
| Name |
| Signature |
| Please submit to: clintonskatingclub@hotmail.com |