



## KANEOHE REGION 113 Player Registration Fee Refund Request Form

### INSTRUCTIONS

Please fill out top portion of form completely and email to the Regional Registrar at [ayso.113.registrar@gmail.com](mailto:ayso.113.registrar@gmail.com).

### REFUND INFORMATION (To be filled in by requester)

PLAYER NAME:

GENDER:

AGE DIVISION:

PHONE NUMBER:

NAME ON REFUND  
CHECK:

#### MAILING ADDRESS FOR REFUND CHECK

STREET ADDRESS:

CITY:

STATE:

ZIP:

### REGION ADMINISTRATION (To be filled in by Registrar/Treasurer)

#### REGISTRAR

REQUEST RECEIVED:

FEES PAID:

REFUND AMOUNT:

#### TREASURER

REFUND CHECK NO.

REFUND DATE:

COMMENTS: