

TWHA PRE-SEASON CAMP REFUND FORM

A non-refundable administration fee of \$25 will be deducted from the refund.

COMPLETED REFUND FORMS TO BE EMAILED TO: admin@trailswesthockey.com

PL/	YER'S NAME					
		Surname		Given Name & Initial		
PL/	YER'S ADDRESS				Postal Code	
RE	GISTERED DIVISION			TOTAL FEE		
HOCKEY CANADA HOCKEY ID			BIRTH DATE	Day - Month - Year		
PARENT NAME		Surname	Given Name	Phone (cell)		
E-	Mail					
RE	FUND JUSTIFICATION					
□ NO LONGER INTERESTED IN CAMP						
	NO LONGER AVAILABLE TO ATTEND					
	MEDICAL/INJURY					
	OTHER (SPECIFY)					
Pai	ent's Signature					
Da	e Submitted					