



USYVL Refund Request Form

Date: _____

I request that the following player be withdrawn from the Spring 2010 Season

Players Name: _____

Date of Birth: _____

Site Name: _____

Please send any refund to the following payee and address:

Payee Name: _____

Address: _____

City, State, Zip: _____

Please note: Refunds will be processed in accordance with USYVL refund policy:

USYVL REFUND POLICY: If for any reason you need to drop out of the league, a written request must be received a minimum of 7 days prior to the league start date. You will receive a refund of 50% of the registration fees paid or a nonrefundable credit toward another season valid for one year from the date of issue. However, no refunds will be issued if you cancel within 7 days of the scheduled league start date, or if you fail to participate in the league. This policy was accepted by you at time of registration.

Refunds requested within 72 hours of registration completion will receive a full refund less a \$15 administrative fee to cover the credit card transaction and player drop/refund processing as long as it is not within 7 days of the season start date. Refunds requested within 7 days of season start date are subject to the above policy.

Please complete form and fax to 310-212-7182
or email to Sharon@usyvl.org
For questions you may call 310-212-7008

Only requests submitted on this form will be considered.