

WFSC Refund Request Form

Please print clearly.

Please refer to the Whitby Figure Skating Club website for Refund Policy details and administration fees at www.whitbyfsc.com.

Drop the refund form in to the "WFSC" Test/Registration mailbox at McKinney Arena or mail Refund Request Form and other documents to:

Whitby Figure Skating Club

P.O. Box 71

Whitby, Ontario

L1N 5R7

Skater's Name: _____ Phone: _____

Parent's Name: _____ E-mail _____

Address: _____

Refund requested for:

Session Day (eg. Sunday)	Level (eg. Level 3)	Time of Session (eg. 9:20 to 10:30am)	Last day skated (eg. Feb 1/11)

Copy of Quickenrollment registration form attached: YES NO

Reason for refund request:

Is refund request due to an injury or illness resulting in a lengthy absence from skating? YES NO

If injured, did the injury occur during a WFSC skating session? YES NO

If yes, was a WFSC Accident Report completed? YES NO

NOTE: All refund requests for medical reasons must be accompanied by a doctor's note.

Other reason for refund:

Parent's Signature

Date

WFSC Office Use Only

Refund Calculation _____

Subtract Administration fee: - _____

Total Refund: _____

Refund Processed by: _____
WFSC Membership Chairperson

Date: _____

Refund Issued by: _____
WFSC Treasurer

Date: _____

Cheque Number: _____

Date of Cheque: _____

Amount of Cheque: _____