



CMHA REGISTRATION REFUND REQUEST FORM

Revised 2023/06/15

TO APPLY FOR A CMHA PLAYER REGISTRATION REFUND - PRINT OFF THIS FORM, COMPLETE ALL FIELDS, THEN SEND A CLEAR LEGIBLE COPY OF THIS FORM BY EMAIL TO THE CMHA REGISTRAR - registrar@cornwallminorhockey.ca (JPG will not be accepted)

Refund Payable to :

Player's Name :

Address :

Email Address :

Player's Date of Birth : MM/DD/YY

Phone Number :

Reason for Refund :

Original Amount Paid :

\$ _____

Original Payment Method :

Check all that apply : Cash Cheque
 Online Other

SIGNATURE : _____ DATE : _____

REFUNDS WILL BE GRANTED BASED ON THE DATE THAT THE WRITTEN REQUEST IS RECEIVED BY THE ASSOCIATION OR BY THE DATE THAT A PLAYER'S INJURY OR MEDICAL CONDITION PROHIBITS A PLAYER FROM PLAYING. (DOCTOR NOTE MUST BE PROVIDED)

IN ORDER TO BE CONSIDERED FOR A REFUND YOU ARE REQUIRED TO COMPLETE THIS REQUEST IN FULL, ALONG WITH SENDING A CLEAR COPY OF A VOID CHEQUE AND / OR DIRECT DEPOSIT FORM FROM YOUR PERSONAL BANK. ALL REFUNDS ARE COMPLETED BY DIRECT DEPOSIT.

ALL REFUNDS WILL BE SUBJECT TO A MINIMUM \$40.00 ADMINISTRATION FEE. ONLINE REGISTRATION FEE, HOCKEY CANADA, HEO AND HEO MINOR FEES AND ANY LATE OR FINAL REGISTRATION FEES ARE ALSO NON-REFUNDABLE.

PLEASE ALLOW 3-4 WEEKS FOR REFUND TO BE PROCESSED

OFFICE USE ONLY

PERCENTAGE TO BE REFUNDED AFTER FEES

ON OR BEFORE SEPTEMBER 30TH -----	100%
ON OR BEFORE OCTOBER 31ST -----	66.6%
ON OR BEFORE NOVEMBER 30TH -----	50%

NO REFUNDS WILL BE ISSUED AS OF DEC 1ST

REGISTRATION FEE PAID : \$ _____

LESS CMHA ADMINISTRATION FEES : \$50.00 _____

LESS ONLINE REGISTRATION FEE & ADMIN FEE : \$40.00 _____

LESS INSURANCE / HEO / LEAGUE FEES : \$ _____

LESS LATE AND / OR FINAL REGISTRATION FEES : \$ _____

SUB-TOTAL : \$ _____

PERCENTAGE TO BE REFUNDED : _____ % OF SUB-TOTAL

TOTAL REFUND : \$ _____

CMHA REGISTRAR : _____ DATE : _____