



APPLICATION TO REQUEST REFUND OF PERFORMANCE BOND

(PURSUANT TO BYLAWS 2 & 3)

TEAM NAME: _____

DIVISION: _____

DATE TEAM DISSOLVED: _____

Please consider this application as our written official notice that our team:

Will no longer be participating in League play with the Kelowna Women's Soccer League, and has ceased

to be a Member, effective: _____.

I, _____, have been given authority by the team, to apply on their behalf for a refund of the Team's Performance Bond of \$100.00. I understand that any outstanding monies or fines will be deducted from this amount, and the balance refunded to the *Payee* listed below.

PAYEE INFORMATION:

Please make cheque Payable to: _____

Mail to: _____

AUTHORIZATION:

Name: _____

Date Signed: _____

Signature: _____

**Please complete and email to treasurer@kwsl.ca, or Mail to: #120-1606 Findlay Road, Kelowna, BC, V1X 6B8.*

Administration Use Only

Refund approved: Y / N

Approved by: _____

Outstanding fines / amounts: Y / N

Amounts Owing: _____

Total Refund Amount: \$ _____

Issued Cheque #: _____

KWSL Title League Sponsor:



Other Sponsors:

