Richmond Minor Hockey Association

Goalie Partial Refund Request

Email your completed form (with \underline{all} required signatures) to office.rmha@gmail.com OR

Deposit your completed form in the <u>red</u> Richmond Minor Hockey Association mailbox inside Forum Rink.



For goalies playing Atom or Juvenile -

Prior to submitting your application, please review the following policies and ensure that your application is within RMHA guidelines.

As a full time goalie, each player registered and playing as a goalie during a hockey season in Atom or Juvenile will be entitled to request a partial refund of his / her registration fees as follows: 50% of the registration fee paid by or for the goalie for that hockey season if the goalie is <u>not</u> using any RMHA equipment OR for goalies in Atom or Juvenile who do use RMHA equipment, a \$100.00 refund.

Please note: partial refunds will not be paid to players registered as goalies for PeeWee, Bantam or Midget as these goalies paid a reduced registration fee.

Refunds are subject to verification by the RMHA Equipment Manager, the applicable Division Manager, and the team coach. Refund requests must be made by using the applicable Form. No refunds will be paid prior to December 1 of a current hockey season; and no refund request can be made following March 31 of a current hockey season.

Note: If a goalie in Atom or Juvenile, chooses to dress as a player when not in goal, refunds do not apply.

Name of goalie requesting a partial refund	
Team	Head Coach
I am requesting a partial refund of my regis	stration fees (check one)
○ \$100 for Atom or Juvenile goalies using Al	NY RMHA goalie equipment
50% of the Atom or Juvenile registration f season. I used ALL my own goalie equipm	
Registration fees paid this season	Copy of my cancelled cheque is attached

If requesting the 50% refund, I declare that I have not borrowed any equipment from the Association for this playing season and I further understand that upon receipt of the refund, I will be ineligible to borrow any equipment for any reason for the remainder of the regular and playoff season of the same year. I will also be ineligible to dress as a player.

Player Signature	Parent or Guardian Signature
Please make the refund cheque payable	e to
Address	
City	Postal Code
Phone	E-mail
Verified by Head Coach - Coach's Signature	Verified by Division Manager - Division Manager's Signature
For use by RMHA Treasurer	
Cheque Amount	Cheque Number Date Issued