Dear TYB Player/Parent,

We are sorry to hear that you no longer going to be able to play with us this season. Our refund policy is to refund 100% of your registration fee if the request is received within the first 30 days of registration. Anything after that, but before our no refund cut-off date, is to receive a 100% refund minus a \$25.00 processing fee. A copy of this policy is below for your reference and can also be found on our website or your online receipt. Please complete the below refund request form and either mail or scan and email it back to us as noted on the form. Once the request is received, we will process the appropriate refund. This is a busy/hectic time of the year for us so please allow 1-2 weeks for processing of this request.

If you have any questions or concerns at all please let me now.

Sincerely, Temecula Youth Baseball

TYB REFUND POLICY

Our league operates on money received from registration and our expenses are budgeted accordingly. TYB's refund policy is as follows:

- 100% refund if requested within 30 days of registration date
- 100% refund, minus a \$25.00 processing fee, if requested after 30 days of registration date but before our no refund cut-off date.
- No refund after Jan. 15th (Spring Season) or Aug. 15th (Fall Season)



(Date)

To: Temecula Youth Baseball

Player's Name:	·	 	
Player's Division:		 	
Plaver's Team [.]			

I would like to request a refund based on the following (Please complete areas of the form.):

□ 1. I am requesting a full refund as my request is within the 30 day TYB refund policy.

□ 2. I am requesting a full refund, minus TYB's non-refundable \$25.00 processing fee, since my request is after the 30 day 100% refund policy but before the Non-refundable cut-off date.

□ 3. I am requesting a league credit for use towards next seasons registration based on the below or attached special circumstances. I understand that this request falls outside the standard refund policy and request that the board review this request for consideration.

Please provide as much pertinent information as possible concerning your specific request. Once your request is received, it will be presented at our next board meeting for consideration. You will be notified of the boards' decision via email, within 3-5 days following the meeting.

(Parent/Guardian Signature) (Please print your name) (Street Address) (City) (State) (Telephone Number) (Zip) treasurer@temeculapony.com Please e-mail to: (email address)) Temecula Youth Baseball Or mail to: 30520 Rancho California Road Suite 107 – PMB 144 Temecula, CA 92591 FOR INTERNAL USE Approved By: ____ (League President) (Date)

Explanation of refund request: (or attached a letter of your own)