# CANCELLATION GUIDELINES

1. Registration refunds will be considered **before** any team practices have commenced. Once your team has started practicing, no refunds will be issued (including prorated refunds).
2. Complete the second page of this form. Incomplete forms will not be considered and will be returned to the family for completion.
3. Mail the form to Attn: Membership Chair, SACBC - AA, 32975 Alvarado-Niles Rd, Union City, 94587-3165
4. Allow a minimum 14 business days for processing.
5. **IMPORTANT**: Regardless of when the cancellation form has been submitted, the family is still responsible of fulfilling all volunteer duties for that season (i.e. Bingo cleanup, Hanamatsuri Tournament, Bazaar, etc). Failure to do so will incur a cancellation fee of $350. It will impact the board’s decision on allowing the family’s subsequent registrations for the following seasons.

***EXCEPTION: If you must cancel your child’s registration because he/she has made their high school basketball team, or have extenuating circumstances, please email Frances Kim, Membership chair at sansei22@gmail.com.***

***\*\*Keep this page for your records.\*\****

# REGISTRANT INFORMATION

|  |  |
| --- | --- |
| **Date:** |  |
| **Player’s name:** |  |
| **Team: (i.e. C Boys, D Girls)** |  |
| **Parent’s name:** |  |
| **Parent’s email** |  |
| **Parent’s phone number:** |  |
| **Reason(s) for cancellation:** |  |
| **Parent signature:** |  |
| **Player signature:** |  |

# BOARD USE ONLY

|  |  |
| --- | --- |
| **Date received:** |  |
| **Board decision:** |  |
| **Family notified:** |  |
| **Registration refund: (YES/NO)** |  |
| **If yes, indicate dollar amount: ed:** |  |
| **Date refund sent: nt:** |  |