

REQUEST FOR REFUND

Southwest Youth Athletic Association

DBA Ken Berry

All requests are subject to approval by the Board of Directors of SYAA, dba Ken Berry League, and an administrative fee will be assessed.

Baseball Division

Softball Division

Reason for Refund (If more space is needed, please attach):

Date Request Submitted: \_\_\_\_\_

ALL REQUESTS MUST BE APPROVED BY THE BOARD OF DIRECTORS OF SYAA, DBA KEN BERRY LEAGUE

Child's Name: \_\_\_\_\_

Child's Division: \_\_\_\_\_

Child's Team (if applicable): \_\_\_\_\_

Requestor Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Payment Date: \_\_\_\_\_

Payment Amount: \$ \_\_\_\_\_

Please email completed form to your league representative.

Or Mail to the below address:

SYAA, Inc.

6021 SW 29<sup>th</sup> St.

Ste. A PMB 342

Topeka, KS 66614

For Office Use Only

Board Decision: \_\_\_\_\_

Decision Date: \_\_\_\_\_

Amount Approved: \$ \_\_\_\_\_