

APPLICATION FOR DEREGISTRATION AND REFUND

Winston Hills Football Club

PO Box 15 WINSTON HILLS 2153 Phone: 0418 634 287

Email: secretary@whsc.com.au

APPLICANT (Over 18)				
PHONE				
EMAIL				
PLAYER DEREGISTERING	☐ AS ABOVE			☐ REFUND ONLY
AGE GROUP				
REGISTRATION FEE PAID	\$			
REASON FOR DEREGISTRATION / REFUND				
I, the Applicant, wish to deregister	the Player named	above from Winston	Hills Football Club for the o	current season.
Further, I apply to be reimbursed timing of this application, some fix I would like the fee refund paid to	ked components ma	ay not be refundable.	e registration fee paid. I u	nderstand that, subject to the
BSB	the following decov	ACC#		i
555		ACC#		
ACC NAME				
SIGNATURE OF APPLICANT	г			
DATE				
CLUB USE ONLY:				
CLOB OSL ONLT.				1
APPROVED BY				
PAYMENT DATE				
PAYMENT DETAILS				