



East Nicolaus Jr. Spartans Youth Football & Cheer

REFUND REQUEST FORM

Name of Participant: _____

Program & Division (Football | Cheer, 7u, 9u, 11u, 13u): _____

Parent or Guardian Information

Parent or Guardian Name: _____

Email associated with w/ Team Sideline account (www.jrspartans.org):

Phone Number: _____

Address to send Refund to: _____

Reason for Requesting Refund: _____

REFUND POLICIES

- Refund requests are charged a 10% processing fee.
- Downpayment and/or deposits are non-refundable.
- All refund checks will be mailed to address provided above.
- No refunds for cancellations after July 1st of the current year.

East Nicolaus Jr. Spartans | PO Box 2483, Marysville, CA 95901 | jrspartans@gmail.com