

Mason SAY Soccer - Player Drop Form

Parents and Coaches,

Before Mason SAY can replace a player that is dropping from a team with a player from the waiting list, we need something in writing *from a parent or legal guardian*. Please complete this form and either email completed form to saysoccermason@gmail.com or mail it in to PO Box 28. Mason, OH 45040!

Player Name: _____

Player Division (*circle 1 gender and 1 division*):

Boys	Mini-Kickers	Instructional	
Girls	Passers	Wings	Strikers
Co-Ed	Kickers	Minors/Seniors	

Parent/Guardian Name: _____

Parent/Guardian Email: _____

Parent/Guardian Phone Number: _____

Reason for Dropping: _____

Refund Policy

There will be **NO REFUND** of the registration fee except for the following cases:

1. if a written request to remove your child is postmarked (or sent by eMail) no later than **10 days** from the final registration date
2. your child is on the waiting list and is not placed on a team
3. your child is injured or becomes ill before the 2nd game of the season and can not participate in any more games
4. your family moves out of the Mason area before the season begins.

*Refunds will **NOT** be given for conflicts due to practice and/or game conflicts.*

Parent/Guardian Signature: _____



www.masonsoccer.org
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