

Request For Refund Form

Please note: All requests for refund should be lodged at the Alice Springs Masters Games Office at Level 1 Alice Plaza Alice Springs NT 0870 or by post to PO Box 1095, Alice Springs NT 0871. No request for refund will be accepted without this form fully completed. NT Major Events Company as organiser for the Alice Springs Masters Games will not be held responsible should this form not be completed or where content is illegible.

Name: _____ **Address:** _____

D.O.B: _____ **Sport/s:** _____

Receipt Number: _____ **Games fee Amount:** _____ \$

Date of payment: _____ **Sports fee 1:** _____ \$

Sports fee 2: _____ \$

Contact Phone Number: _____ **Total:** \$

Email Address: _____

Please print clearly as email addresses are case sensitive and need to be accurate.

Reason For Refund:

Please circle

Illness which will prevent me from competing: Doctors Certificate Attached? Yes No

Injury which will prevent me from competing: Doctors Certificate Attached? Yes No

Unable to travel: Doctors Certificate Attached? Yes No

Death: Death Certificate Attached? Yes No

Other:

Provide details?

Declaration: The information contained in this application is true and accurate. I understand that where any information is not complete or the reasons given above are not deemed acceptable to the organiser to provide grounds for a refund, the refund will be at the discretion of the organiser.

Applicant Signature: _____ Date: _____

Refund Policy:

Any application for refund will only be accepted and granted when received by the Organisers prior to 5:00pm Sunday 30th June 2024. All applications for refund must be in writing and a **\$20.00 administration fee** will be deducted from the refund.

Consideration of any application for refund made on or after 1st July 2024 will be at the complete discretion of the Organisers.