

This form must be completed for ALL requests for a credit of fees before a credit can be considered:

Gymnast's Name	<input type="text"/>	Parent:	<input type="text"/>
Contact Email:	<input type="text"/>	Phone no:	<input type="text"/>

Gym location (NH, SHC, Tristar)	Gymnast's Level & Class time:	Coach(es)
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Fees can only be credited in the following circumstances: Please tick the one that applies to you.

1. Unable to train due to illness or injury more than 2 weeks:

A medical practitioner's certificate is required - is this attached? Yes / No

NB: credits not available for less than 2 weeks duration.
2. Resignation from gym before the end of term: one month's notice required

(if credit is approved by the committee it will be for exceptional circumstances and will apply from one month after receipt of this form)
3. An amount has been incorrectly charged to your account: Amount \$

Please advise details and date of incorrect charge:

<input type="text"/>
<input type="text"/>
<input type="text"/>

Details Required:

Dates and Class times to be credited: (please be as specific as possible)

Gym Location	Date	Class Time
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Please get this form signed off by your coach for reason 1 or 2 (attached email approval is acceptable) then email it to: xtremergtreasurer@gmail.com

Verified by Coach:	<input type="text"/>	<input type="text"/>
	Name:	Name:

Approved by Committee:	<input type="text"/>	<input type="text"/>
	Name:	Name: