

ANNEX II

WITHDRAWAL NOTICE (WITH OR WITHOUT REFUND)

Medical withdrawal

- Please complete, sign and send the form below, **accompanied by a legible copy of a valid medical certificate**, by email at: classique@gymnix.ca
- Deadline: **February 10, 2020**
- Take note that a \$25 administrative fee will be charged for all medical refund requests received.
- Refund will be done within 30 business days following the last day of competition.

Non-medical withdrawal

- Please complete, sign and send the form below by email at: classique@gymnix.ca , by **December 10th, 2019** at the latest.
- No refund (except for medical reasons) will be issued after **December 10, 2019**.
- Take note a \$25 administrative fee will be charged for all non-medical refund requests.

CLUB INFORMATION			
Club			
Contact person			
Email			
Phone number			
ATHLETE INFORMATION			
Last name, first name			
Birthday (dd/mm/yyyy)		Category	

Head coach's signature : _____

Date (dd/mm/yyyy) : _____