

**23rd Annual Santa Barbara Shootout
February 18 – 20, 2011 at UCSB**

**Partial Refund Request Form
For Games Not Played Due To Rain Plan Schedule**

Submit This Form If Your Number of Games Played is Different Than Your Original Request

Team: _____ Contact: _____

E-Mail: _____ Cell Phone: _____

Original Game Count

Please Circle One

Two

Three

Four

Five

Final Game Count

Please Circle One

Zero

One

Two

Three

Pay To Information

Name on Team Account or Name of Institution (You Choose)

Check Payable To: _____ Tax ID #: _____

Mailing Information

Complete Mailing Address

Complete Mailing Address: _____

A credit in the amount of the fees that would have been paid to the referees on your missing games will be sent to the address you specify.

Please return this form via e-mail attachment to paul.ramsey@essr.ucsb.edu. The form may also be FAXed to (805) 893-7054 to the attention of Paul Ramsey but this may cause a delay in receiving it.

Due by March 1, 2011 For Prompt Attention and Processing