Science Undergraduate Society

The Science Undergraduate Society of UBC c/o Dean of Science - 6270 University Boulevard - Vancouver, BC V6T 1W5
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SCIENCE ATHLETICS REBATE FORM

League/Event: _____ **Team Name:** _____

Captain Name	
Student Number	
In Science? (Y/N)	
Phone	
Email	

Name	**Student Number**	**In Science? (Y/N)**

Please attach your receipt to the front of this form. **The phone number and email fields are mandatory for the team captain.** Once approved for a rebate, the team captain will be contacted by email. The amount you receive back will be determined at the end of the year based on the amount of available funds. A minimum of 60% of your team must be Science students in order to qualify for rebates. Your team MUST participate with "Science" as your division.

I,_____, the captain of the above team am providing valid information (names of students & student numbers) in the roster and comply with the conditions that providing false information may lead to disqualification from receiving a rebate.

X_____ _____ X_____

(Team Captain) Date (mm/dd/yyyy) (Alex Lee – VP Student Life)