



BAKERSFIELD GUNNERS, INC.

A California Non-Profit Corporation
P.O. Box 45001 · Bakersfield, Ca. 93384-5001
(661)396-4231 · (661)398-4932 (fax)
www.bakersfieldgunners.com

Request for Reduction in Monthly Dues

This form is to be used by parents requesting a reduction of monthly dues, based on their financial need.

Consideration will be given to families that demonstrate a true financial need for assistance. Families participating in fund raising events will be given additional consideration, when determining the level of assistance.

In most cases, a percentage of the monthly dues will be considered.

There is no guarantee of assistance.

Player(s) Name(s): _____

Player(s) Address: _____

Team(s)/Coach(s): _____

Amount of assistance requested and why:

Parent Contact Info:

Parent's Name: _____

Parent's Address: _____

Parent's Phone#: _____

Best Contact Time: _____

Return to the Manager of your team. The form will be forwarded to the corporate office for consideration.