

## Game Change or Reschedule Form

This form is to be used when rescheduling a game or to set the date for a TBA game.

	Division:		
Manager or Coach Maki	ng Request		
Name:		Team:	
Original Scheduled Gan	ne		
Home Team:		Game #	
Visiting Team:		Date:	
Location:		Time:	
New Scheduled Game			
Home Team:		Game #	
Visiting Team:		Date:	
Location:		Time:	
Comments:			
comments.			
Both teams agree with t	he change as stated above.		
	Home Team Manager		Visiting Team Manager
Name:		Name:	
Signature:		Signature:	
Date:		Date:	
Governor has approved the	ne change. Yes No		If not approved, please state reason.
Name:			
Signature:			
Date:		_	
Faxing or emailing from party to party is acceptable.			