



SASKATOON ADULT SOCCER INC.

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[www.saskatoonadultsoccer.com](http://www.saskatoonadultsoccer.com)

## RESCHEDULE REQUEST

### ORIGINAL GAME INFORMATION

DATE: \_\_\_\_\_ TIME: \_\_\_\_\_ SEASON: Indoor ☐ / Outdoor ☐

LOCATION: \_\_\_\_\_ DIVISION: \_\_\_\_\_

HOME TEAM: \_\_\_\_\_

VISITOR TEAM: \_\_\_\_\_

For more rescheduling information please refer to the Rules and Regulations, section XVII.

### RESCHEDULING INFORMATION

TEAM REQUESTING RESCHEDULING: \_\_\_\_\_

REASON FOR REQUEST: \_\_\_\_\_

SUBMITTED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

SAS will assign **Times and Dates** based upon Facility/Field availability.

The rescheduled game date/time is completely at our discretion.

This is NON- NEGOTIABLE.

**\* Teams are only allowed one reschedule request per season.**

**\* Reschedule Request Fee:**

- \$30.00 for requests submitted 10 or more business days prior to game;
- \$55 for request submitted 7 to 9 business days prior to game.

**\* We will not accept reschedule requests with less than 7 days to the game.**

**\* The fee must accompany the Request form or it will not be considered.**

**\* Form and fees must be sent to [info@saskatoonadultsoccer.com](mailto:info@saskatoonadultsoccer.com)**

### FOR SAS OFFICE USE ONLY

DATE RECEIVED: \_\_\_\_\_ RECEIVED BY: \_\_\_\_\_

RESCHEDULE REQUEST: ☐ GRANTED ☐ DENIED REASONING: \_\_\_\_\_

REFUND ISSUED: \_\_\_\_\_