



# GAME CHANGE FORM

<b>Official Use Only</b> Date Received: _____ Initials: _____
---

DATE: \_\_\_\_\_

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

OPPONENT: \_\_\_\_\_

CHANGE OF: Date \_\_\_\_\_ Time \_\_\_\_\_ Venue \_\_\_\_\_ Other: \_\_\_\_\_

The undersigned teams hereby request the changes below to be made to their WPSL schedule.

Original Date of Game: \_\_\_\_\_ New Date of Game: \_\_\_\_\_

Original Time of Game: \_\_\_\_\_ New Time of Game: \_\_\_\_\_

Original Venue of Game: \_\_\_\_\_

New Venue of Game: \_\_\_\_\_

Reason for Change: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
NAME OF TEAM MAKING REQUEST

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PRINTED NAME, TEAM REPRESENTATIVE  
REPRESENTATIVE

\_\_\_\_\_  
SIGNATURE, TEAM

\_\_\_\_\_  
NAME OF TEAM ACCEPTING REQUEST

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PRINTED NAME, TEAM REPRESENTATIVE  
REPRESENTATIVE

\_\_\_\_\_  
SIGNATURE, TEAM

**Email completed form to the league at [rsparling@buxmonttorch.com](mailto:rsparling@buxmonttorch.com). This must be received no later than one week prior to the earlier date of the game to be played unless there are extenuating circumstances (i.e. weather cancellation).**