Please Complete In Block Capitals & Return To Your Division Representative At Your Earliest Opportunity.

|  |  |
| --- | --- |
| Club Name: |  |
| Team Name: |  |
| Age Group: |  |

**Details Of Game Affected:**

|  |  |
| --- | --- |
| Opposition: |  |
| Venue: |  |
| Kick Off: |  |
| League or Cup Game: |  |

**Team Reason:**

|  |  |  |
| --- | --- | --- |
| Are You Requesting Your Game To Be Cancelled Due To A Lack Of Players? | |  |
| How Many Players Are **Available** For The Fixture? | |  |
| How Many Players Are **Unavailable** For The Fixture? | |  |
| Are You Requesting A Cancellation or A Postponement? | |  |
| Reason For Lack Of Players (School Reasons, Holiday, Illness): |  | |

**Venue Issue:**

|  |  |  |
| --- | --- | --- |
| Are You Requesting Your Game To Be Cancelled Due To A Venue Issue? | |  |
| Is The Venue Unavailable To You For The Fixture Due To No Kick Off Time Being Allocated/Available? | |  |
| Has The Decision To Postpone Been Due To A Waterlogged Pitch? | |  |
| Details Of Who Carried Out The Pitch Inspection: |  | |
| When Was The Inspection Conducted: |  | |
| Which Areas Of The Pitch Are Affected? |  | |
| FOR WATERLOGGED PITCHES PLEASE ACCOMPANY THIS FORM WITH A PHOTO/VIDEO OF THE PITCH IF THE GAME WAS CALLED OFF BY SOMEONE OTHER THAN A LEAGUE OR MATCH OFFICIAL. | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Signature |  | | Date |  |
| Print Name | |  | | |

