GAME SWITCH FORM

<u>GAME SWITCH ONLY</u> – (Direct switch with another team, does not require rescheduling of referee's.)

Game Number #
Day:
Date:
Time:
Level:
Arena:
Away Team Name:
Home Team Name:

Game Number #
Day:
Date:
Time:
Level:
Arena:
Away Team Name:
Home Team Name:

Request by (Team Name):
Request by (Name/ Position):
Request by (email address):
Reason for Request: (ie: Smith Falls Tournament – Feb 10-13)

1. **Opposition Agreed to Switch: (Yes/No)**
   Agreed by (Name/Position):
   Agreed by (email address):
2. **Opposition Agreed to Switch: (Yes/No)**
   Agreed by (Name/Position):
   Agreed by (email address):
3. **Opposition Agreed to Switch: (Yes/No)**
   Agreed by (Name/Position):
   Agreed by (email address):