NORCO LITTLE LEAGUE

GAME RESCHEDULE REQUEST FORM

To: Player Agent,	Game Scheduler			
From:				
Team:				
I am requesting th	nat my game on:			
Day:	Date	Time:		
Field:				
Opponent:				
be rescheduled as	I am not able to fiel	d 9 players for the f	ollowing reasons:	
<u>Player</u>	<u>R</u>	<u>eason</u>		
1				
2				
3				
4				
5				
6				
Signature:				
Date:				
Note : To be consid	dered, reasons must	be listed and verifie	ed.	
		******	********	*******
Do Not Write Belo		******	********	******
Approved: □	Denied: □	Date:		
Your game has be	en rescheduled to th	ne following date:		
Day:	Date	:	Time:	
Field:				
Opponent:				