

Rescheduled Match Request Form

(For applications within 14 days of the scheduled match)



1. This form must be completed when a Hills Football Member Club wishes to reschedule a match within the 14 day period as required in our By Laws.
2. Hills Football will only accept this request, if the opposing club agrees and both clubs agree to a date time and location.
3. Once both clubs have agreed, this form must be sent to the Competitions Manager no later than 48 hours prior to the start of the original scheduled match date in order to ensure HFI can update the draws and referees etc
4. Once both clubs agree, sign and submit this form, the scheduling is final and any further reschedule requests will not be considered.

CLUB DETAILS	
Club Requesting Reschedule	
Opposition Club	
MATCH DETAILS – ORIGINAL MATCH	
Age Group, Division, Colour:	
Match Date:	
Kick off times:	
Venue:	
Match Details – Agreed Reschedule	
Age Group, Division, Colour:	
Match Date:	
Kick off times:	
Venue:	
RESCHEDULED REASON	
Reason for rescheduling application	
SUBMITTED BY	
Club:	
Name:	
Position:	
Date:	
APPROVAL INFORMATION	
Reschedule Clubs Approval Given By:	
Signature	
Opposing Clubs Approval given by	
Signature	