



YRAA Game Change Request Form

GAME CHANGED FROM:

SPORT:		LEVEL: Junior <input type="checkbox"/> Senior <input type="checkbox"/> Both <input type="checkbox"/>
DATE:	GAME TIME:	LOCATION OF GAME:
HOME TEAM:		VISITING TEAM:

GAME CHANGED TO:

DATE:	GAME TIME:	LOCATION OF GAME:
HOME TEAM:		VISITING TEAM:

REASON FOR CHANGE:

CHANGE REQUESTED BY:	SCHOOL:
VERBAL AGREEMENT RECEIVED FROM OPPOSING COACH(ES). Name(s) must be provided	E-MAIL:
	NAME:
	E-MAIL:
	NAME:
	E-MAIL:

**This form must be emailed to mark.arsenault@yraa.com
at least 7 days prior to the requested change.**

FOR OFFICE USE ONLY

REQUEST: GRANTED DENIED

NOTIFICATION: COACHES REFEREE ASSIGNOR
 ATHLETIC DESIGNATES WEBSITE UPDATED

APPROVED BY

DATE