

# Fixture Cancellation Request Form

Name Of Club \*

Team Name \*

Select Age Group \*

- ☐ Under 7's
- ☐ Under 8's
- ☐ Under 9's
- ☐ Under 10's
- ☐ Under 11's

Date Not Available \*

Oppositions Team Name \*

Add the name of your opposition team here

Reason for cancellation

Add answer here

## Fixture Cancellation Declaration

- ☐ I, the undersigned, understand that the cancellation requested above may be subject to a financial penalty as detailed in Regulation 6 of the League Rules.
- ☐ I am aware that, as per the League Rules, all fines and administration charges must be paid in full within 14 days or further financial penalties may be added (also detailed in Schedule A of the League Rules).
- ☐ I also understand that if the above team is entering a Tournament that is out of our parent County FA, we have sought permission from the League prior to entering. A form is available on our website and from the County FA for completion.
- ☐ I am aware that it is also my responsibility to notify the opposition if the fixture I am cancelling is less than seven days from the date below. I also understand that if I have not notified the opposition, I will be liable to reimburse them any expenses incurred whilst attending a fixture that will not be played through no fault of their own.

Full Name \*

Today's Date \*

Your Signature