

**HOCKEY GAME CHANGE REQUEST FORM**

All game change requests must be submitted for Board review and approval. Requests are not considered official until the league provides written confirmation to all involved parties.

**1. Original Game Information TO BE COMPLETED BY SUBMITTING TEAM**

League / Division: \_\_\_\_\_  
Home Team: \_\_\_\_\_ Away Team: \_\_\_\_\_  
Original Game Date: \_\_\_\_\_ Original Game Time: \_\_\_\_\_  
Original Arena / Rink: \_\_\_\_\_

**2. Requested Change**

- Requested New Game Date: \_\_\_\_\_  
- Requested New Game Time: \_\_\_\_\_  
- Requested Arena / Rink (if different): \_\_\_\_\_

**3. Reason for Change**

(Please provide a brief explanation for the request)

\_\_\_\_\_  
\_\_\_\_\_

**4. Submitted By**

- Name: \_\_\_\_\_ Role  Coach  Manager  
- Team: \_\_\_\_\_ Email Address: \_\_\_\_\_  
- Phone Number: \_\_\_\_\_

**5 Coach Agreement**

Both coaches/ reps must acknowledge their below area for this request to be considered.

Home Team Coach Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Home team confirms they agree to the proposed change (Check Box)   
Home team Club Rep: \_\_\_\_\_ Club Rep Approval:

Away Team Coach Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Visiting teams confirm they agree to the proposed change Check Box)   
Visting team Club Rep: \_\_\_\_\_ Club Rep Approval:

**Board Decision (For League Use Only)**

Approved  Denied  
Approved Game Date: \_\_\_\_\_ Time: \_\_\_\_\_  
Arena: \_\_\_\_\_

Notes / Conditions:

\_\_\_\_\_

Board Representative Name: \_\_\_\_\_ Date: \_\_\_\_\_

*Please allow 7 days for review. Submission of this form does not guarantee approval.*

**FORWARD FORM TO LEAGUE PRESIDENT AT [ekgihlpresident@gmail.com](mailto:ekgihlpresident@gmail.com) for approval,**