



# FIXTURE CHANGE REQUEST FORM 2018/19

*Note: this form must be fully completed and sent to the Competitions Commission at [competitions@volleyballireland.com](mailto:competitions@volleyballireland.com) in order to review and approve fixture changes (please refer to Section 5 of the Competition Rules). Otherwise a request may be refused or delayed.*

<b>Please indicate what type of fixture you are requesting to change:</b>		
League: <input type="checkbox"/>	Association Cup: <input type="checkbox"/>	Reference: <input type="checkbox"/> <i>(Competitions/Office Use Only)</i>
<b>Fixture Change Details:</b>		
Club Team Name (include division if league):		
League Week#/ Cup Round#:		
Opposition:		
Is your team the home team?		
Original date & warm-up time:		
Original Venue:		
New proposed date & warm-up time:		
New Venue:		
<b>Please provide the reasons why your team is requesting this change and why this was unable to be done during the rescheduling window (in either September or December):</b>		
<b>Have you been in touch with the opposition, via club secretary or team rep to discuss this change? If yes, please provide information on the correspondence (this is only for informational purposes only; this step does not have to be done beforehand) including the timing of such correspondence, etc.:</b>		
<b>Please list below (and attach documents to email clearly labelled) any extra information you may have to support the above reason for changing fixtures e.g. emails:</b>		
_____	_____	_____
Club Secretary	Club Name	Date