

PETERBOROUGH & DISTRICT JUNIOR ALLIANCE LEAGUE

APPLICATION TO CANCEL / POSTPONE A GAME

Date _____

Club _____ **F.C.**

Dear Registration/Fixture Secretary,

With reference to **RULE 10(f)** of the Peterborough & District Junior Alliance League we hereby apply for permission to postpone the following fixture.

_____ **F.C.** V _____ **F.C.**

Age Group _____ **Date of Game** _____

Venue _____

Kick Off Time _____

The cancellation request is due to our team being required to participate in a match as Indicated below:-

Please tick appropriate box

LEAGUE CUP		COUNTY CUP	
P.F.A. CUP			
OTHER REASON (PLEASE SPECIFY WITH A LETTER)			
I will inform the Referee's Secretary when permission is granted			

I enclose two S.A.E. one addressed to the opposition and one to myself.

A NEW DATE WILL BE ORGANISED BY THE REGISTRATION/FIXTURE SECRETARY

SIGNED CLUB SECRETARY _____

PRINT NAME _____