

COVENTRY NINE PIN SKITTLE LEAGUE
REQUEST FOR FIXTURE ALTERATION

Date of Request: _____

Team: _____ Game Versus: _____

On Date: _____ To be Altered to: _____

Signature of Captain Requesting Change:

I Agree to the above change

Signature of Opposing Team Captain:

This request to reach the fixture secretary 20 days prior to the date of the game.
This request can be left in the score box.
Reason for request to be given on the reverse side of this card.

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