



8629 W. Central / Wichita, KS 67212

316-729-7770

scsasoccer@sbcglobal.net

### RESCHEDULE FORM

The following criteria is required prior to completing the reschedule form:

- A request for a rescheduled game during the regular season must be received in the SCSA Office a minimum of 10 calendar days prior to the original game date. Games will not be rescheduled if the request is received less than 10 calendar days prior to the original scheduled date. NO EXCEPTIONS!
- Communication between teams must go through the Head Coach and/or Manager only. No exceptions.
- There is a \$25 reschedule fee to be paid by the Initiating Team when the Rescheduled form is submitted to SCSA.
- Rescheduled games are available during regularly scheduled Saturday and Sunday league season. Each team is limited to 2 (two) rescheduled games within a season.
- If the opposing team does not agree to the reschedule, the game will be played on the original date, time and field.
- Teams failing to notify the office or no-show for the original or confirmed rescheduled game will be charged a forfeit fine of \$50.00 and receive the 0-3 final score.
- Form may be emailed to [scsasoccer@sbcglobal.net](mailto:scsasoccer@sbcglobal.net) (including both teams & SCSA), faxed to 316-729-1801 or brought to the SCSA office.

**Initiating Team** (team requesting reschedule):

Team Name: \_\_\_\_\_ Age Division: \_\_\_\_\_

Head Coach or Manager Name: \_\_\_\_\_

Email: \_\_\_\_\_ Telephone: \_\_\_\_\_

**Opposing Team** (initiating team's opponent for reschedule):

Team Name: \_\_\_\_\_ Age Division: \_\_\_\_\_

Head Coach or Manager Name: \_\_\_\_\_

Email: \_\_\_\_\_ Telephone: \_\_\_\_\_

**Rescheduled game information:**

Game Date: \_\_\_\_\_ Game Number (found on master schedule): \_\_\_\_\_

Time of Game: \_\_\_\_\_ Assigned Field: \_\_\_\_\_

First Choice Requested Date: \_\_\_\_\_ First Choice Requested Timeframe (am/pm/any): \_\_\_\_\_

Second Choice Requested Date: \_\_\_\_\_ Second Choice Requested Timeframe (am/pm/any): \_\_\_\_\_

I understand by signing this Reschedule Form, I agree with the information above and will notify my parents/players of the rescheduled game time and date upon SCSA approval.

- A no-show or forfeit of the original or rescheduled game results in a \$50 fine and 0-3 final score for the team in default.
- If no opposing coach agreement received, score for Initiating team will be 0-3 until rescheduled form completed.
- If opposing coach agrees with reschedule and form completed to SCSA, game score will be 0-0 until final score received.

\_\_\_\_\_  
Initiating Team Signature (Head Coach/Manager)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Opposing Team Signature (Head Coach/Manager)

\_\_\_\_\_  
Date