

# MICHIGAN YOUTH SOCCER LEAGUE

U-19/U-18/U-17/U-16/U-15/U-14/U-13/U-12/U-11/U-10/U-9/U-8

Affiliated with MSYSA and USSF

**Re: FALL 2010/SPRING 2011 Schedule Change Request**

(This notice is required to maintain insurance coverage of league games.)

Email to: Moe Geromette [myslcomm@comcast.net](mailto:myslcomm@comcast.net)

TEAM REQUESTING GAME CHANGE: \_\_\_\_\_

Requestor's Name: \_\_\_\_\_

Date: \_\_\_\_\_ AGE: \_\_\_\_\_ DIVISION: \_\_\_\_\_ GAME NO: \_\_\_\_\_

Home Team: \_\_\_\_\_

Away Team: \_\_\_\_\_

	<u>Scheduled for:</u>	<u>Changing to:</u>
Field:	_____	_____
Date:	_____	_____
Time:	_____	_____

**This request must be accompanied by a check payable to MYSL and mailed to the address below. Also please complete the following:**

Enclosed is game change fee of \$25.00 - check no. \_\_\_\_\_ or the \$50.00 field change fee - check no. \_\_\_\_\_ for multiple field changes.

**Please mail this completed form with your check payable to MYSL to:  
MOE GEROMETTE, MYSL Commissioner  
32354 Huber Lane  
Fraser, MI 48026**

Please check here \_\_\_ verifying that an email has been sent to [myslcomm@comcast.net](mailto:myslcomm@comcast.net)

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Check No. \_\_\_\_\_ Date received by MYSL Commissioner \_\_\_\_\_