



Intramural Sports Default / Cancellation form

Sport: _____ Today's Date: ___/___/___ Division _____

Team Requesting Change: _____ Captain's Name: _____

Captain's Phone Number _____ Captain's PID _____

I request that our game versus _____ Scheduled for (date) ___/___/___,
Time, _____, Court/Field _____.

Check one:

- 1) Be defaulted with my team receiving the loss and the opponent the win
- 2) Be cancelled with the mutually approved consent of the opposing captain (below)

***note: If the game is being defaulted, the opposing team's captain does not need to sign this form. Team captains are responsible for all contact with opposing teams to arrange a cancelled game in advance.

Signed: _____
Captain of Team Requesting Change

NOTE: Teams may only default one game per season and tournament games may not be defaulted

To Be Completed By Captain of Opposing Team

____ I agree to the cancellation and my team will not receive a win or loss for the scheduled contest
initial

Print Name: _____

Phone Number: _____

PID: _____

Sign: _____

Captain of opposing team

Date Received _____

Time Received _____

Date Approved _____

League Coordinator: _____