



**NATIONAL LEAGUE SYSTEM**  
**MATCH POSTPONEMENT FORM**



**THE COMBINED COUNTIES FOOTBALL LEAGUE LTD**

**MATCH POSTPONEMENT FORM**

<b>Date of Match</b>	
<b>Home Team</b>	
<b>Away Team</b>	
<b>Time of Inspection</b>	
<b>Reason For Postponement</b> (Give as full an explanation as necessary)	
<b>Inspecting Referee</b> (Name & Handbook Number)	
<b>Persons Informed</b>	Please state Yes or No (Note: Some of these may be informed by email or text message)
Referee Sec.	
Assistant Referees Sec.	
Results Sec.	
Fixtures Sec.	
Match Referee	
Match Assistant Referees	
Visiting Club	
<b>Name of Person Submitting Form</b>	
<b>Position In Club</b>	
<b>Date &amp; Time Submitted</b>	

Refer to League Rule 15.2 for the procedure to follow regarding postponements.  
When completed this form may be posted, faxed or emailed to :-

Alan Constable  
3 Craigwell Close, Chertsey Lane, Staines TW18 3NP  
Facsimile: 01784 451614  
Email: alanc52@aol.com