



**OKANAGAN MAINLINE
AMATEUR HOCKEY ASSOCIATION**
 Central Office
 #40-12560 Westside Road
 Vernon, BC.
 V1H 1S9
 Phone/Fax 250-503-5538

Request for OMAHA League Game Change

As per OMAHA Regulation Three, paragraph 3008 (c)

Today's Date: _____ Association: _____

Phone: _____ Fax: _____

Division: _____ Tier: 1 2 3 4 Atom (circle one)

Requesting a change for league game # _____ Date: _____

Home Team: _____ vs Visiting Team: _____

Time: _____ Location: _____

TO:

Home Team: _____ vs Visiting Team: _____

Date: _____ Time: _____ Location: _____

Reason: _____

Game change requested by: _____
 Name (signature) Association Position

Game change approved by: _____
 Name (signature) Association Position

FOR OMAHA USE ONLY

Division Director: _____ Fax: _____

Application Status: Granted Denied Date: _____

Signature: _____

Comments: _____

Processed by Central Office	Fee Collected	Fee Distributed
Date: _____	Date: _____	Date: _____
yy / mm / dd	yy / mm / dd	yy / mm / dd