**BUCS Fixture Change Request Form**

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| **Sport** (E.g. Badminton) |  | **League/Knockout Name** (E.g. South Western 2A) |  |
| **Date and Time of Fixture** (Scheduled start time) |  | **Venue** (If on BUCS Play) |  |
| **Home Team** (E.g. Plymouth Men’s 1) |  | **Away Team** (E.g. Bristol Men’s 2) |  |
|  |
| **Full explanation of why this fixture needs to be rescheduled:**  |
| *This form needs to be completed and sent to* *bucs@su.plymouth.ac.uk* *7 days (one week) before the date of the fixture scheduled on BUCS. The completion and submission of this form doesn’t guarantee the fixture being moved.* |
| **Captain’s Name** |  |
| **Signature** |  |
| **Date** |  |