

REFEREE'S POSTPONEMENT/ ABANDONMENT FORM

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ABANDONMENT FORM

Match: _____ v. _____

Match Date: _____ / _____ / _____ Scheduled Kick-Off Time: _____

(Please delete/tick where appropriate)

Was an Early Inspection requested by the Club? YES/NO

Time of Arrival at Ground: _____

Time of Inspection(s): _____

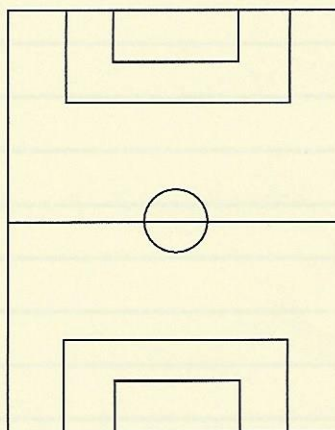
Were your Assistants in attendance? YES/NO

Reason for the Postponement/Abandonment:

Waterlogged Frozen Fog

Floodlight Failure Other

Identify areas of the field which are unplayable (where applicable):



Comments: _____

_____ *(Please continue overleaf, if necessary)*

Were Officials from the Home/Away Club in attendance/consulted before reaching your decision? YES/NO Home Club Only

Name of Club Official(s) Present: 1. _____ Home Club

2. _____

1. _____ Away Club

2. _____

Were the Club Officials in agreement with your decision? YES/NO Home Club Only Away Club Only

Was a delayed Kick-Off considered as an option? YES/NO

Comments: _____

Name of Match/Inspecting Referee: _____ Date: _____ / _____ / _____

This form is to be forwarded to the relevant League by e-mail or fax within 24 hours of the postponement.