

NHFOA GAME OFFICIAL ASSIGNMENT REPLACEMENT FORM

GAME DATE \_\_\_\_\_ GAME TIME \_\_\_\_\_  
HOME TEAM \_\_\_\_\_ GAME FIELD \_\_\_\_\_  
VISITING TEAM \_\_\_\_\_ LEVEL JR / FR / JV  
ORIGINAL OFFICIAL \_\_\_\_\_ (printed name) \_\_\_\_\_ (signature/date)  
REPLACEMENT OFFICIAL \_\_\_\_\_ (printed name) \_\_\_\_\_ (signature/date)  
OFFICIAL POSITION REF / UMP / LIN / LJD / BJD

WRITTEN NOTIFICATION IS REQUIRED BY THE ORIGINAL OFFICIAL TO:  
HOME TEAM ATHLETIC DIRECTOR AND THE NHFOA COMMISSIONER.

NOTIFICATIONS OF LESS THAN 36 HOURS PRIOR TO GAME TIME MUST BE MADE  
BY TELEPHONE OR FACSIMILE, AS WELL AS WRITTEN ORIGINAL BY MAIL.

notified: \_\_\_\_\_ home school AD  
\_\_\_\_\_ NHFOA commissioner  
\_\_\_\_\_ referee (by commissioner, varsity games only)

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