



CHANGE TEAM LINE-UP CARD

Team: _____ Opponent: _____

Date: _____

Draw: _____ Ice: _____

Change of line-up at the beginning of end: ☐

Reason for Change: _____

Throwing Order (circle appropriate number)

Throwing Hand (circle appropriate number)

Skip: _____ 1 2 3 4 Left or Right

Third: _____ 1 2 3 4 Left or Right

Second: _____ 1 2 3 4 Left or Right

Lead: _____ 1 2 3 4 Left or Right

Spare: _____ 1 2 3 4 Left or Right

Coach: _____

Signature: _____

Note:

Give this form to the Chief Umpire one-half hour before practice time.

The alternate will be allowed in the field of play

Circle
Opponent Informed: Yes / No

April 2024