



APPLICATION FOR CHANGE

			Region:		
DIVISION	<input type="checkbox"/> AA	<input type="checkbox"/> BB	<input type="checkbox"/> CC		
TEAM NAME					
NAME OF CAPTAIN				MOBILE:	
TYPE OF CHANGE					
<input type="checkbox"/> Replace Current Player <input type="checkbox"/> Add New Player <input type="checkbox"/> Change Card Details <input type="checkbox"/> Others					
REASON(S) FOR REQUEST*					
<input type="checkbox"/> Reason for leaving <input type="checkbox"/> Lost Existing Card					
New Player Details - For player addition , Rating of New player must be same or lower than 2 nd highest of team player. - For player exchange , Rating of New Player must be same or lower than exchange player	Player Details		FULL NAME: (name without surname will be rejected)		
			Email:		
			Mobile:	NRIC:	
	Card Details		Card ID:		
		Card Name:			
		Catch Phrase:		Rating:	
Replaced Player					
Card Details (for card replacement)	Old Card ID				
	New Card ID				
		Card Name:	Catch Phrase:		

Captain's Signature _____

Date of Submission _____

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FOR OFFICIAL USE ONLY

Verified By: _____ (League Master)

Date: _____