

## **APPLICATION FOR CHANGE**

FLIGHT		□ AA □ A □ BB □ B □ CCC □ CC □ C	
TEAM NAME			
NAME OF CAPTAIN			MOBILE:
TYPE OF CHANGE		<ul> <li>□ Replace Current Player</li> <li>□ Change Card Details</li> <li>□ Others</li> </ul>	
REASON(S) FOR REQUEST*		□ Reason for leaving □ Lost Existing Card	
must be same or lower than 2 <sup>nd</sup> highest of team Player Details Email:		(name without surname Email:	e will be rejected)  NRIC/FIN:
player.  - For player exchange, Rating of New Player must be same or lower than exchange player.	Card Details	Card ID: Rating:	
	Player being replaced	<u> </u>	
Card Details (for card replacement)	Old Card ID		
	New Card ID	Card Name:	
CAPTAIN'S SIGNATUF Please fax the form to DARTSL FOR OFFICIAL USE O	VE at Fax No.: <b>6735-</b>	<b>-1381</b> , or email the form to: <b>I</b> 6	DATE OF SUBMISSION eague_sg@dartslive.com
Verified By: (League Master) Date:			