



Please Email:
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APPLICATION FOR CHANGE

		Region:		
DIVISION	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			
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 3 rd highest of team player. - For player exchange , Rating of New Player must be SAME or LOWER than replaced 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 ID : _____		
		Card Name : _____		
		Catch Phrase : _____		

CAPTAIN'S SIGNATURE

DATE OF SUBMISSION

FOR OFFICIAL USE ONLY

Verified By: _____ (League Master) Date: _____