

DARTSLIVE SUPER SHOP SHOWDOWN
REGISTRATION FORM

Team Size:	4 PLAYERS
SHOP:	
TEAM CAPTAIN:	
Captain Email: (mandatory)	Mobile No:

<i>A</i>	<i>BB</i>	<i>B</i>	<i>C</i>
<i>Rating 14.89 & below</i>	<i>Rating 11.89 & below</i>	<i>Rating 8.89 & below</i>	<i>Rating 6.89 & below</i>

Rating Group	Name of Player (including Team Captain)	Mobile	Player Card ID (16-Digit)	Rating	Gender
A					
BB					
B					
C					

Please Note:

- (a) Limited to 1 TEAM per SHOP.
- (b) Min 1 Female player in the Team.
- (c) All players must be DARTSLIVE OFFICIAL LEAGUE Players (SUPER LEAGUE SEASON 15, SUPER 2 SEASON 9, SG PREMIER SEASON 7).
- (d) All form must be endorsed by SHOP with SHOP STAMP.
- (e) Closing date to submit form **16 MARCH 2018 FRIDAY, 6PM** via email league_sg@dartslive.com or fax 6735 1381.
- (f) All ratings will be referenced against latest league rating, whichever higher will be taken into consideration.

SHOP Stamp & Signature

Captain's Signature

Submission Date

Forms without Shop's Signature & stamp will be rejected.