



Please Email:
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APPLICATION FOR CHANGE

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 exchange player	Player Details	FULL NAME:		
		(name without surname will be rejected)		
		Email:		
		Mobile:	NRIC/FIN:	
	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

FOR OFFICIAL USE ONLY

Verified By: _____ **(League Master)** **Date:** _____