



APPLICATION FOR CHANGE

DIVISION (Please circle)	
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
1. New Player Details (for player replacement or addition)	
<ul style="list-style-type: none"> - Player addition, Rating of New player must be same or lower than 3rd highest of team player. - Player exchange, Rating of New Player must be same or lower than exchange player (if existing player is top 3 rater) OR; same or lower than 3rd highest rater in the team. 	
Replaced Player Information	FULL NAME: Rating:
New Player Information	FULL NAME: (name without surname will be rejected)
	Email:
	Mobile: NRIC/FIN:
Card Details	Card ID: - - -
	Card Name: Rating:
2. Update Player Details (for card replacement)	
Player Name	
Old Card ID	- - -
New Card ID	- - -

*All information stated in the form are mandatory, incomplete form submission will be rejected.

CAPTAIN'S SIGNATURE

DATE OF SUBMISSION

Please fax the form to DARTSLIVE at Fax No.: **6735-1381**, or email the form to: league_sg@dartslive.com

FOR OFFICIAL USE ONLY

Verified By: _____ (League Dept) Date: _____