## **Savannah Area Darting Association**

P.O. Box 23553 Savannah, Ga. 31403 912-525-2001

www/savdarts/org

Date contacted	
When contacted	
Dues Received	
Date Eligible	

## Adds/Deletes/Changes

		above for league use only						
Team Name								
 Team #				_				
Captain				_				
				_				
f this player is an		Add		Please provide the ir	nformation requested			
If this player is an		Delete		Why is this Player be	eing Deleted			
Name:			Home Phone		Email Add	Email Address:		
Address			Work Phone					
City	State		Zip:		М	F		
If this player is an		Add		Please provide the in	nformation requested			
If this player is an		Delete			Please provide the information requested  Why is this Player being Deleted			
Name:		Delete	Home Phone	willy is this riayer be	Email Address:			
Address			Work Phone	<del></del>		. 0001		
City	State		Zip:		М	F		
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If this player is an		Add		Please provide the in	nformation requested			
If this player is an		Delete		Why is this Player be	eing Deleted			
Name:			Home Phone		Email Add	ress:		
Address			Work Phone					
City	State		Zip:		М	F		
If this player is an		Add		Please provide the ir	nformation requested			
If this player is an		Delete		Why is this Player be				
Name:		Home Phone		· ·	Email Address:			
Address			Work Phone					
City	State		Zip:		М	F		

added players will be eligible to play on the first match night following receipt of this form and the players dues by the membership Chairman. Cutoff is 12:00 Midnight Friday for a postmark if mailed. Cutoff is 8:00 PM Monday if hand-delivered to the Membership Chairman.

Deleted players will be ineligible to play on any other team during the season if he/she has played in any game during the season Players dues are not refunded however, players who have been deleted without playing may request credit toward the following season's dues.

Players may Not be added after week eleven (11) except for emergencies.

SADA Forms.xls Add-Delete