

TEAM NAME / TEAM CAPTAIN*

CHANGE AUTHORIZATION FORM

***The FIRST PERSON listed on your roster is the TEAM CAPTAIN**

*Only complete the top portion of this form if you need to change your **TEAM NAME** or your **TEAM CAPTAIN**.*

This form must be received in the APA office prior to July 3, 2009.
(Changes will not be made at the event, except in emergency situations.)

TEAM NUMBER _____

CURRENT TEAM NAME _____

NEW Team Name _____
(please print)

CURRENT TEAM CAPTAIN'S NAME _____

NEW Team Captain's Name _____
(please print)

Signatures of team members
(Must have majority of team members sign)

For APA Use Only – please initial Finance Paperwork Updated _____ Computer Updated _____ Scoresheets Printed _____ Name Badges Printed _____
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----- (cut along this line) -----

TEMPORARY TEAM CAPTAIN CHANGE AUTHORIZATION FORM

Bring this portion with you to Las Vegas if someone other than the TEAM CAPTAIN will be registering your team and collecting the National Qualifier Money.

TEAM NUMBER _____

TEAM NAME _____

TEAM CAPTAIN'S NAME _____

Team Member Who Will Be Registering Team _____
(please print)

Signatures of team members
(Must have majority of team members sign)

