

# SQUAD CHANGE REQUEST

ENTRY #

League Official: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Date: \_\_\_\_\_ Email \_\_\_\_\_

Center: \_\_\_\_\_ City: \_\_\_\_\_

**Bowler Name:** \_\_\_\_\_

Original Date and Time:      Date \_\_\_\_\_ Time: \_\_\_\_\_

**Request to CHANGE TO:**      Date \_\_\_\_\_ Time: \_\_\_\_\_

*Must be submitted by **LEAGUE OFFICIAL ONLY** by email ([michiganstatepepsi@comcast.net](mailto:michiganstatepepsi@comcast.net))  
or by, mail or Fax: (616) 635-2034 – No calls  
Please note requests to change are subject to availability*

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OFFICE USE ONLY:

Changed in Schedule book - Date: \_\_\_\_\_ Changed in computer – Date: \_\_\_\_\_

Change mailed/emailed to: \_\_\_\_\_ Date: \_\_\_\_\_

Entry refiled Date: \_\_\_\_\_



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