



Change of Manager Notification Form

Team Information

Date: _____

Current Team Information

Team Name _____

Current Manager Name: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Home Phone: () _____ Alternate Phone: () _____

E-mail Address: _____

Fax Number _____
Current Manager's Signature: _____

New Team Information

New Manager Name: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Home Phone: () _____ Alternate Phone: () _____

E-mail Address: _____

Fax Number _____
New Manager's Signature: _____

Co-Manager Team Information

New Co -Manager Name: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Home Phone: () _____ Alternate Phone: () _____

E-mail Address: _____
Co-Manager's Signature _____