

PROPOSED RULE CHANGE FORM

This is a proposed:
(please circle one)

- 1) change of an existing rule
- 2) addition to an existing rule
- 3) new rule

Rule number for proposed change (include Part, Rule, Section, and page number where applicable):

Proposed change: (use the back of this sheet if additional room is needed)

Reason for this proposed rule change:(use the back of this sheet if additional room is needed)

Signed: _____ Age group: _____

Please return this form by November 27 to:

stpeteraa@spaa.com

or

5252 Mexico Road Suite 170
St. Peters, MO. 63376