



# TRANSFER FORM



First Name	Surname	Date of Birth
Street Address		
Home Phone Number	Mobile Phone Number	Email Address

## Parent/Guardian Endorsement

I wish to apply for a transfer from \_\_\_\_\_(club), which is affiliated with the \_\_\_\_\_ (competition). I last played with the club listed above in \_\_\_\_\_ (year). I wish to play with \_\_\_\_\_ (club), in the \_\_\_\_\_ (competition).

Have you previously played with the club you are requesting to transfer to?    Yes            No

If answered yes, what year? \_\_\_\_\_

State reason(s) for making this application:

I wish to advise that I have not been approached by any person associated with the club I wish to transfer to, and it is my decision to play with a new club.

I declare that I am not a disqualified player with my previous club or League/Association and that the above information is true. I also understand that this application for a transfer is conditional upon being approved by my previous club or League/Association and duly endorsed by the Competition.

_____	_____
Signature (Player)	Signature (Parent/Guardian)
_____	_____
Date	Date

## Club Endorsement

_____	_____	_____
Signature (Club President or Secretary)	Name	Date

**OFFICIAL USE ONLY**

Clearance No: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_