



## NORTHERN CONFERENCE PLAYER TRANSFER APPLICATION

| CLEARANCES                         | PERMITS   |  |
|------------------------------------|---|--|
| Permanent <input type="checkbox"/> | <b>Type 2</b> <input type="checkbox"/><br>Transfer dates from: _____ to _____ | <b>Match Day</b> <input type="checkbox"/><br>Match Date: _____ |

A clearance/permit must be obtained for all players requesting to change clubs. Please follow the following steps to transition your transfer.

1. Complete your personal information and transfer request details below
2. Obtain transfer approval from your departing Club Registrar or Club President
3. Submit completed form to new club to allow for online processing.
4. Once online clearance is complete – finalise your registration online with new club.

**CLOSING DATE FOR ALL CLEARANCE / TYPE 2 PERMITS IS 30 JUNE WITHIN CURRENT SEASON**

### Player Details

|                             |                           |
|-----------------------------|---------------------------|
| Name:                       | Address:                  |
| Date of Birth:              | Suburb:                   |
| Club transferring from:     | Club transferring to:     |
| District transferring from: | District transferring to: |
| Parent/Guardian Signature:  | Player Signature:         |

### Reason for transfer – please circle those that apply:

Moved house                       New School                       Not happy at Old Club  
 Wish to play with friends                       No team in my age group                       Other – please give reason below

Other reason: \_\_\_\_\_

**PLEASE NOTE: This completed form and online clearance request must be with the District Registrar no later than 5pm Thursday to ensure clearance is completed in time.**

| Approvals (departing Club Registrar/President) |  |
|--|--|
| Clearance / Permit                             | Granted <input type="checkbox"/> Denied <input type="checkbox"/> |
| Reason: _____                                  | Game Count: _____  |
| Name: _____                                    | Signature: _____   |
| Contact Number: _____                          | Date: _____  |

*DISTRICT USE ONLY*

|  |       |
|--|-------|
| Received by District:                    | Date: |
| Online transfer completed:               | Date: |
| Registration completed online by player: | Date: |

**The attachment of an email approval to this document may take the place of approval signatures**