PLAYER TRANSFER CLEARANCE FORM

TCO Signature: _



| PERSONAL DETAILS (all fields are mandatory) | | |
|---|---------------------------|---|
| Surname: First Name: | | |
| Address: | | |
| Suburb and Postcode: Date of Birth: | | |
| Telephone: (Home) () (Wo | ork) () | (Mobile) |
| E-mail Address: | | |
| | | |
| PLAYER TRANSFER APPLICATION | December 11 Chale in the | Ai-bi // |
| I am currently registered with the | | |
| I wish to transfer to the | | Association/League. |
| My reasons for applying to transfer to a new club are as follows; | | |
| | | |
| | | |
| | | _ |
| I declare that the information I provide on this form is true and correct. | | |
| Applicant's Signature: | Date: | |
| | | |
| TO BE COMPLETED BY PARENT OR GUARDIAN IF PLAYER IS UNDER 18 YEARS OF AGE I, (parent1), and on behalf of (parent2), being the | | |
| parents/guardians of (child), and on behalf of (parents/guardians of (child), being the | | |
| Baseball Club. We confirm that his/her date of birth is | | |
| We declare that the child of which we are parent/guardian will abide by the rules, regulations and policies of the Association and its | | |
| affiliate that exist from time to time, a copy of which can be obtained from the club Secretary for our perusal. | | |
| Parent/Guardian Signature: Date: | | |
| Patenty Quartian Signature | | |
| DESTINATION CLUB ACKNOWLEDGMENT | | |
| I declare that the applicant has been accepted as a member of the Club. I acknowledge that our club has provided the player's current club with a "Letter of Intent". Also, to my knowledge, the player is financial to his/her current club and Association. | | |
| | | |
| Secretary's Signature: Date: | | |
| TRANSFER DECISION | | |
| On behalf of the player's current club, I advise that; | | n which affiliates the player's current |
| | club, I advise that; | |
| The Player is cleared to play with his/her new club | | play with his/her new club |
| The Player has been refused clearance to transfer | - | refused clearance to transfer for the |
| following reasons; | following reasons; | |
| | | |
| Secretary's Signature | Administrator's Signature | |
| Secretary's Signature: Date | Print Name | Date |
| | | |
| ADMINISTRATOR USE ONLY TCO Processing this form (Print Name): Date: | | |

.It is mandatory that clubs use this Form and the properly completed form sent to the Competition Administrator as soon as possible.