

Senior Community Registration Transfer Form

League Information

Club _____ League: _____

Have you previously been registered with another club? Yes ☐ No ☐ Note: If Yes, a clearance may be required

Previous Club: _____ League: _____

Player Information

Surname: _____ Date of Birth: ____/____/____

Given Name(s): _____

Address: _____

Suburb: _____ Postcode:

Phone: _____ Mobile: _____

Email: _____

Occupation: _____

Football History

I have previously played senior football with the below clubs, in order (indicate junior grade clubs where required)

Club	League	State	From	To

Are you currently under suspension? Yes ☐ No ☐

In signing this form I agree to abide by the Constitution and By Laws of the applicable League.
I hereby acknowledge that all information provided above is true and correct.

Signed (Player): _____ Date: ____/____/____

Note: If the person signing this application has not attained the age of 18 years at the date of signing, the form must be countersigned by a parent or legal guardian

Signed (Parent): _____ Date: ____/____/____

Certification by an authorised club officer

Signed (Official): _____ Date: ____/____/____

Transfer Information (if required)

Complete this section by the player only if a transfer from the club you are currently registered is required

	Club	League	State
From:			
To:			

Reason: _____

I authorise the football club to complete the processing of this clearance on my behalf

Signed (Player): _____ Date: ____/____/____

To be completed by nominated club official from players current club

Result: **Approved / Refused** Reason: _____

Signed (Official): _____ Date: ____/____/____

League Administration

Application Result: **Approved / Refused** Registration No: _____

Signed (Official): _____ Date of Lodgment: ____/____/____