## PLAYER TRANSFER CLEARANCE FORM



PERSONAL DETAILS (all fields are mandatory)			
Surname: First Name:			
Address:			
		Date of Birth:	
Telephone: (Home) ( ) (Wor	k) ( )	(Mobile)	
E-mail Address:			
PLAYER TRANSFER APPLICATION           I am currently registered with the         B	Baseball Club, in the	Association/League	
I wish to transfer to the B			
My reasons for applying to transfer to a new club are as follow			
I declare that the information I provide on this form is true and correct			
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) approve of him/her playing baseball with 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:			
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:			
<b>TRANSFER DECISION</b> On behalf of the player's current club, I advise that;	On behalf of the Associa	tion which affiliates the player's current	
	club, I advise that;	tion which annates the player's current	
The Player is <b>cleared</b> to play with his/her new club	The Player is <b>cleared</b>	to play with his/her new club	
The Player has been <b>refused clearance</b> to transfer fo	or the 🔲 The Player has bee	n <b>refused clearance</b> to transfer for the	
following reasons;	following reasons;		
Secretary's Signature: Date		: Date	
ADMINISTRATOR USE ONLY TCO Processing this form (Print Name): Date:			
TCO Signature:			
PLEASE NOTE: For new registrations, please insert details in the myClub system NOT registered and must be entered into the system after the player's second			
Competition Administrator as soon as possible.			