

Registration Secretary
Address in handbook



TRANSFER OF REGISTRATION OF PLAYER

I am at present a player of Football Club
and registered with THE EASTERN REGION WOMEN'S FOOTBALL ELAGUE, and I desire the
permission of the Council of THE EASTERN REGION WOMEN'S FOOTBALL LEAGUE for my
registration to be transferred to theFootball Club.

Full Name Of PlayerReg No.....

Signature of Player Date

I desire the transfer of the registration of

FromFootball Club to Football Club

Signature of Secretary / Manager

Print Name Date

I assent to the registration of being transferred

from Football Club to Football Club

Signature of secretary / Manager

Print Name Date

To be completed by The Registration Secretary

To be returned by

Date transfer was completed

Signature of Registration Secretary

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