



PLAYER TRANSFER FORM

Football Association of Ireland

Player Transfer Form Season 2016/2017



I, _____ Date of Birth _____
 (Name of player, use **BLOCK LETTERS** only)

Of: (present Club) _____
 (use **BLOCK LETTERS** only)

Of: (present League) _____
 (use **BLOCK LETTERS** only)

Wish to apply for approval of transfer from my present club to:

New Club _____
 (use **BLOCK LETTERS** only)

Of: (league) _____
 (use **BLOCK LETTERS** only)

Signed: _____ Date _____
 (Player's usual signature)

Signature of parent/guardian _____
 (Note: to be signed by parent/guardian only if player under 18 at time of transfer)

I have no objection to the transfer of the above named player as he/she is not under suspension by the Club or League at present, nor does he/she have any outstanding commitments to either party, nor has she/he any outstanding financial commitments to either party.

Signed _____ Date _____
 (Present Club Secretary)

I accept the transfer of the above named player

Signed _____ Date _____
 (New Club Secretary)

I confirm that the above information is correct and that the transfer fee of €25 (if applicable) has been paid

Signed _____ Date _____
 (Present League Secretary/Registrar)

League Stamp & Date

