

New South Wales Hockey Association

INTER-ASSOCIATION PLAYER TRANSFER REQUEST FORM FOR YEAR 2005.

Player's Name: _____ PIN Number: _____ Address: _____ Phone: _____

Association: _____ Club: _____ Date of Birth: _____

Wishes to transfer to

Association: _____ Club: _____ Age Group: _____

For the following reason/s:

Player's Signature: _____ Approval of Parent/Gaurdian (*signature*): _____

Losing Association: _____ Approval / Disapproval (*circle*) by meeting of _____ (*month*) _____ (*year*)

Signatory: _____ Printed Name: _____ Title: _____

Gaining Association: _____ Approval / Disapproval (*circle*) by meeting of _____ (*month*) _____ (*year*)

Signatory: _____ Printed Name: _____ Title: _____

Forward completed form to: NSWHA Records Officer.

PLEASE NOTE CAREFULLY: All transfers between Associations MUST be NSWHA approved BEFORE the player can represent the new Club or Association. An approval for a transfer may be given immediately by the NSWHA Records Officer providing both losing and gaining Associations agree to the transfer. In the event of disagreement, a decision will be made by the next available NSWHA Executive Meeting. An appeals process is available for disallowed transfers. Details from NSWHA Secretary.

OFFICE USE: Date Received:	Date Entered:	Initials:	Signed:
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