



IHWA PLAYER TRANSFER FORM

SECTION 1 - APPLICANT

NAME: _____
(FIRST) (LAST)

ADDRESS: _____
(STREET) (SUBURB) (POSTCODE)

TRANSFER FROM: _____ TO: _____
(CLUB) (CLUB)

REASON FOR TRANSFER (Optional): _____

SIGNED: _____ DATE: _____

PARENT/GUARDIAN IF U/18: _____

SECTION 2 – CURRENT CLUB PRESIDENT/SECRETARY

CLUB NAME: _____

PRESIDENT/SECRETARY'S NAME: _____

APPROVAL OF TRANSFER / CLEARANCE: YES NO

IF NO, PLEASE STATE REASON: _____

SIGNED: _____ DATE: _____

SECTION 3 – NEW CLUB PRESIDENT/SECRETARY

CLUB NAME: _____

PRESIDENT/SECRETARY'S NAME: _____

APPROVAL OF TRANSFER / CLEARANCE: YES NO

IF NO, PLEASE STATE REASON: _____

SIGNED: _____ DATE: _____

Date Sent to IHWA: _____