

Inter Club Transfer

Name:	
Unique ID:	
Address:	
I wish to transfer from	to
Date of last Championship match with	was
Date of last competitive match with	was
Name of Competition	Date
Signature of Applicant	Date
Signature of Approval of Current Club Secretary	Date
Signature of Approval of New Club Secretary	Date
Signature of Current County Secretary	Date
Signature of approval of new County Secretary (This transfer must be approved at a County Board meeting in y	
Transfer approved / refused	
If refused, please state reason (s)	
Signature of National /Provincial Secretary	Date