

TRANSFER/CLEARANCE FORM SPECIAL CIRCUMSTANCE APPLICATION

SIGNEDPlease ensure you read relevant information that can be located on the Ju	
	•••••
approving this transfer	
Please outline your Special Circumstances that would warrant the Qualific	ations Committee
Division	
Team	
CLUB	
What Club and team are you requesting for the 2017 season	
Division	
Team	
CLUB	
Player Name:	
Please give details for the player requesting to Transfer/Clearance and the	eir 2016 season
Contact number	
Address	
Notice of Application is hereby given by	•••••