

AFL VICTORIA PLAYER WITHDRAWAL OF TRANSFER FORM



GUIDELINE

The Player's registered club must submit this form to its affiliated league when refusing the transfer within the six clear business day timeframe.

SECTION ONE - To be completed (BLOCK LETTERS) and signed by the player:-	
I, (Players full name)	Date of Birth:
Of (Address)(P/Code)	(Suburb) (State)
Wish to withdraw my application	to transfer to theFootball Club
In the	Football League / Association.
And wish to <u>remain</u> a registered p	layer with theFootball Club
In the	Football League / Association.
Home Phone:	. Work Phone:
Mobile:	Email:
I declare that all information provided is true and correct.	
Signed:	Date:
NB: Deliberately providing misleading information could result in immediate penalties against the player and / or the club.	
SECTION TWO - To be completed (BLOCK LETTERS) and signed by the club President / Secretary (or delegated representative) that the player wishes to remain at:-	
-	declare that the above particulars are, to the best of a (Penalties will apply to any club that lodges a false form).
Name: (Please Print)	Position: (President /Secretary)
Signature:	Date: