

## Jersey Football Combination & Jersey Football Association Combined Transfer Form



## **Personal Details**

First Name:	Second Name:
Gender: (Male/Female)	Date of Birth: (DDMMYY)
Address:	
Parish:	Post Code:
Contact Telephone No:	E-Mail Address:
Existing Club:	Proposed New Club:
I wish to transfer to the above Proposed Nev	w Club for the following reason(s):
Comments from the Club the player wishes	to transfer from. (Support/Oppose)
Comments from the Club to which the playe	er wishes to transfer to.
Do you owe your present club any fees or de	LIES. AES/NO
The current Club <b>MUST</b> sign this form even if t	
	Date:
	Date:
	Date:
	Date:

This form should be completed and returned to the JFA. It is the responsibility of the transferring player to ensure the form is completed and returned.

Transfers can only take place between September 1st and the termination of the December 31st.

The Rules governing transfers can be found on the Jersey FA Website JerseyFA.com under the Section on Resources – Transfers.