FEE
£20
Transfers are permitted before the 31st December.

Jersey Football Association

Player Transfer Form – JFA Combination League

Player Information

Full Name: _____ Gender: _____

Address: _____

Phone: _____ Email: _____

Date of Birth: DD/MM/YYYY FA Number (FAN) if known: _____

Transfer Information

Existing Club: _____

Proposed New Club: _____

Reason For Transfer: _____

Do you owe your present club any fees or dues? YES ☐ NO ☐

Parental Information – Only complete if player is Under 18

This part of the form must be completed if the player is under 18 years old.

Parent's Name: _____ Date of Birth: _____

Email: _____ Phone: _____

Address: _____

Signatures

PLAYER: I hereby request that my JFA Combination League registration is transferred from the existing club to the proposed new club, as named above.

Signature: Date:

PARENT (only required if player is under 18): I hereby give permission for my child to transfer from the existing club to the proposed new club, as named above.

Signature: Date:

NEW CLUB SECRETARY: I hereby confirm that our club has no objection to this transfer:

Signature: Date:

EXISTING CLUB SECRETARY: I hereby confirm that our club has no objection to this transfer:

Signature: Date:

Data will be used for the administration of the Jersey Football Association Combination League and its competitions and will be processed in line with the JFA's Privacy Policy, available online at www.jerseyfa.com/public/privacy-policy