Appendix 2



Player Withdrawal of Transfer Form

The Player's registered club must submit this form to its affiliated league when refusing the transfer within the six (6) clear business day time frame.

SECTION ONE - To be completed (BLOCK LETTERS) and signed by the player:-	
I, (Player's full name)	
Of (Address)(Suburb)(State)(P/Code)	
Wish to withdraw my application to transfer to the	
In the	
And wish to <u>remain</u> a registered player with theFootball Club	
In the	
Home 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:-	
On behalf of the football club, I declare that the above particulars are, to the best of my knowledge true and correct. (Penalties will apply to any club that lodges a false Player Withdrawal of Transfer Form).	
Name: (Please Print)	
Position: (President / Secretary)Signature:Date:	