TRANSFER FORM

PLAYER INFORMATION

Name of Player Requesting Transfer _____ Player ID # _____

Effective Date of Requested Transfer _____

Name of Current Team Transferring From _____

Club of Current Team (if applicable) _____

League of Team Player Transferring From _____

Name of Team Transferring To _____

Club of Team Transferring To (if applicable) _____

League of Team Player Transferring To _____

ACKNOWLEDGEMENTS

Signature of Player's Parent/Guardian _____ Date _____

Signature of Coach Transferring From _____ Date _____

◯ *Approve* ◯ *Disapprove*

Reason for Disapproval _____

INSTRUCTIONS

Completed form(s) should be emailed, along with proof of player card destruction (image), to **both** the departing and accepting leagues. The Ohio Soccer Association transfer policy can be found online under Rule 205.3 of the Playing Rules.

FOR LEAGUE USE ONLY

Date Received:_____ Date Accepted:_____ Date Rejected:_____

If rejected, why:_____

_____

_____ _____
Departing League Registrar Date

_____ _____
Accepting League Registrar Date