**ITC Form**

|  |  |
| --- | --- |
| Full Name of Applicant |  |
| Date of Birth |  |
| Nationality |  |
| Passport Number  |  |
| Email Address |  |
| Phone Number |  |
| Current Team  |  |
| Current Federation (where the club is registered) |  |
| Do hereby apply to be transferred to: |
| New Team |  |
| New Federation (where the club is registered) |  |
| In submitting this request I hereby confirm that I have no outstanding debts or disciplinary issues with the club and / or the Federation and that I will pay the necessary fees to both federations.  |
| Signature of Player (or legal guardian if u18) |  |
| Date of signature of Player  |  |
| Signature of official from New Federation |  |
| Date of signature of official from New Federation |  |
| Signature of official from Current Federation |  |
| Date of signature of official from Current Federation |  |

Once completed we request that the NEW Federation hereby notify IFAF of the transfer by emailing a confirmation of the transfer to transfers@ifaf.org

This should state that:

We, the [Name of Federation] confirm the transfer of [FULL NAME OF PLAYER] from [NAME OF CLUB], [NAME OF FEDERATION] to [NAME OF NEW CLUB].