



APPLICATION FOR CLUB TRANSFER

Horowhenua Kapiti Rugby Football Union
P O Box 503
LEVIN

Players Name:.....
(First Name) (Surname).

Address:.....
.....

Contact Number:..... Date:.....

I wish to apply for a transfer from the.....Rugby Football Club to the
..... Rugby Football Club.

My reason for applying for a transfer is/are:.....
.....

Grade and year last played:.....

Signatures:

Player:.....

Secretary of Previous Club:..... Name:.....

Secretary of New Club:..... Name:.....

DEPARTING UNION TO COMPLETE
(if transferring to HKRFU from an outside club)

Chief Executive Officer.....

Signature.....

Dated.....

It is the responsibility of the new club to ensure the form is complete before it is sent to the HKRFU. Incomplete forms will be returned to clubs.

HKRFU TO COMPLETE

Your application to transfer has been APPROVED/DECLINED.

Dated:

Signature of approving officer:..... Name:.....