



## REGISTRATION OF CLUB TRANSFER FORM

1. Player Details

Name: \_\_\_\_\_  
(Last name) (First Names)

Signed: \_\_\_\_\_

Contact number: \_\_\_\_\_

2. Club the Player is Transferring to:

\_\_\_\_\_

Signature of Authorised Officer at that club:

\_\_\_\_\_

Name: \_\_\_\_\_

Position: \_\_\_\_\_ Date: \_\_\_\_\_

3. Club the Player is Leaving:

\_\_\_\_\_

Signature of Authorised Officer at that club:

\_\_\_\_\_

Name: \_\_\_\_\_

Position: \_\_\_\_\_ Date: \_\_\_\_\_

4. Registered with Christchurch Metro Cricket

Date received: \_\_\_\_\_ Signed: \_\_\_\_\_

Name: \_\_\_\_\_ Position: \_\_\_\_\_