



Newcastle District Women's Hockey Association Inc.

TRANSFER CARD

Please complete this card in printed block letters

SURNAME: GIVEN NAME:

ADDRESS:

SUBURB: POST CODE:

PHONE (AH) PHONE (BH)

FORMER CLUB: PROPOSED CLUB:

SIGNATURE OF PLAYER: DATE:

NAME: WHO WAS A MEMBER OF
..... CLUB (FORMER CLUB) HAS BEEN GRANTED A CLEARENCE TO
..... CLUB (PROPOSED CLUB).

SIGNED BY (FORMER CLUB): DATE:

REPRESENTATIVE (PROPOSED CLUB): DATE:



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