



# Inter-Club Transfer Application

1. Name: \_\_\_\_\_

2. Address: \_\_\_\_\_

3. Date of Birth: \_\_\_\_\_ 4. Email Address: \_\_\_\_\_

5. GAA Membership Number: \_\_\_\_\_

6. I wish to transfer from Club: \_\_\_\_\_

7. To Club: \_\_\_\_\_

8. I wish to transfer for:  Football  Hurling  Both

9. Football Grade: \_\_\_\_\_ 10. Date of last football game: \_\_\_\_\_

11. Hurling Grade: \_\_\_\_\_ 12. Date of last hurling game: \_\_\_\_\_

13. Reason for transfer \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Signed (in Irish):** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature of Parent(s) Guardian (s) if Under 18:** \_\_\_\_\_

14. On behalf of New Club \_\_\_\_\_ (at 7 above) I **consent** to this transfer:

**Signed (in Irish):** \_\_\_\_\_ **Date:** \_\_\_\_\_

15. On behalf of Old Club \_\_\_\_\_ (at 6 above) I **consent** to this transfer:

**Signed (in Irish):** \_\_\_\_\_ **Date:** \_\_\_\_\_

16. On behalf of Old Club \_\_\_\_\_ (at 6 above) I **object** to this transfer for the following reasons

(use additional sheet if required): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Signed (in Irish):** \_\_\_\_\_ **Date:** \_\_\_\_\_

In signing this form all parties hereby declare that the information provided herein is true **and is a full and total disclosure of all the facts relating to this transfer application**. All parties also declare that they have full knowledge of the current rules and regulations of the Association, including those governing inter-club transfers as outlined in the Official Guide and Dublin GAA Byelaws, and hereby give permission to the relevant Competitions Control Committee to make a decision on this application. Questions 1 to 13 must all be completed and incomplete applications will not be processed. The closing date for receipt of applications is 5.30pm on 8<sup>th</sup> December annually.