



**AFL VICTORIA
PLAYER WITHDRAWAL OF TRANSFER FORM**



GUIDELINES

The Player's registered club must submit this form to its affiliated league when refusing the transfer within the six clear business day timeframe.

SECTION ONE - To be completed (BLOCK LETTERS) and signed by the player:-

I, *(Players full name)*..... Date of Birth:
...../...../.....

Of *(Address)*..... *(Suburb)*..... *(State)*.....
(P/Code).....

Wish to **withdraw** my application to transfer to the.....Football Club

In the Football League / Association.

And wish to **remain** a registered player with theFootball Club

In the Football League / Association.

Home Phone: Work Phone:

Mobile: Email:

I declare that all information provided is true and correct.

Signed: **Date:**

NB: Deliberately providing misleading information could result in immediate penalties against the player and / or the club.

SECTION TWO - To be completed (BLOCK LETTERS) and signed by the club President / Secretary (or delegated representative) that the player wishes to remain at:-

On behalf of the football club, I declare that the above particulars are, to the best of my knowledge true and correct. (Penalties will apply to any club that lodges a false Player Withdrawal of Transfer Form).

Name: *(Please Print)* Position: *(President /Secretary)*

Signature: Date:

PLAYER TO COMPLETE

CLUB TO COMPLETE