



APPLICATION FOR TRANSFER OF REGISTRATION

Player's Name: _____

Current Club: _____ **ARU/ID** _____

Proposed Club: _____

I request approval for a transfer of Registration, and certify I have no financial Indebtedness to any Rugby Union Club or State Union.

Player Sign: _____ **Witness' Sign:** _____

Date: _____ **Witness' Name:** _____

Current Registered Club's Certification

I certify that _____ **(Player's Name)**

Is currently registered with the _____ **RUFC and at the**
Date of certification

1. has no financial indebtedness to the Club

2. has the following financial debts outstanding _____

Sign: _____ **Name:** _____

Date: _____ **Position:** _____

NOTE: This section needs to be completed within seven (7) calendar days of receipt from the player, if not signed within that time the Union may grant the transfer

An authorised signature on behalf of the South Australian Rugby Union Ltd

Signature: _____ **Print Name:** _____ **Date:** _____