



ISLE OF MAN FOOTBALL ASSOCIATION
2017/18 TRANSFER FORM



FULL NAME OF PLAYER.....

ADDRESS.....

.....POST CODE.....

DATE OF BIRTH

MOBILE NO:.....

EMAIL ADDRESS.....

Please tick the box if you do not wish to subscribe to the "Back of the Net" e-newsletter

NAME OF EXISTING CLUB

CONSENT OF SECRETARY OF EXISTING CLUB.....

DATE OF DESIRED TRANSFER

DATE LAST PLAYED WITH EXISTING CLUB

PLAYERS SIGNATURE

If consent withheld, give reason below :-

NAME OF PROPOSED FUTURE CLUB

CONSENT OF PLAYER'S FUTURE CLUB SECRETARY

PLAYERS SIGNATURE.....Date:.....

****FOR OFFICE USE ONLY****

DATE RECEIVED BY IOMFA.....

DATE ON WHICH THE PLAYER CAN PLAY WITH NEW CLUB.....

SIGNED BY IOMFA SECRETARY.....

TRANSFER FEE RECEIVED.....

PLEASE NOTE incomplete forms will not be processed but will be returned.

EXISTING CLUB to issue transfer form upon request. The completion and return of the form to the IOMFA is the responsibility of the player. Completed forms should be forwarded to the IOMFA together with the £20.00 TRANSFER FEE.