

## THE ONTARIO SOCCER ASSOCIATION



**Request for Inter-Provincial Transfer** 

THE ONTARIO SOCCER ASSOCIATION REQUESTS A RELEASE FROM YOUR ASSOCIATION'S JURISDICTION TO THE ONTARIO SOCCER ASSOCIATION FOR THE FOLLOWING PLAYER BY RETURN FAX: Fax #: (905) 264-9445: ATTN Jamie Smith Date of Request: Player Passport/Registration #: Name of Player: \_\_\_\_\_\_ Date of Birth: \_\_\_\_\_ Address: Province: Postal Code: City: Province with which player last registered: Last Club Played For: Year Last Registered: Ontario team with which you plan to register: We hereby release the player for transfer to the jurisdiction of the Ontario Soccer Association. This player is not being released for transfer to the Ontario Soccer Association for the following reason(s): PROVINCIAL ASSOCIATION: NAME AND TITLE: SIGNATURE:

DATE: \_\_\_\_