

ASSOCIATION PLAYER TRANSFER FORM

Player's Full Name (as per passport)			
Address (current)		City	
Email (current)		Phone	
Gender	Male / Female (please circle)	Mobile	
Association Transferring From (former)		Age	
Association Transferring To (new)		Date of Birth	
Have you played in a BBNZ Tournament/League this year?	Yes / No (Please Circle)		
Payment of \$25.00 (attached)	Cash / Cheque / Automatic Payment (please circle and attach)		

Reason for Transferring to a New Association (attached any further information if required)

New Association Approval of Transfer (CEO/President Only)	(Print Name / Role)	(Signature)	Date
Former Association Approval of Transfer (CEO/President Only)	(Print Name / Role)	(Signature)	Date
Parental/Guardian Approval of Transfer	(Print Name / Relationship)	(Signature)	Date

Please forward this transfer form along with the fee of \$25.00 (non refundable) to the Basketball New Zealand CEO at the address listed below. Cheques to be made out to Basketball New Zealand.

BASKETBALL NEW ZEALAND OFFICE USE ONLY			
Total Payment Made	\$	Date Received	
Receipt Number			
Transfer Status	Approved / Declined (please circle)		
Details			
Basketball New Zealand Signature		Date Notified	

BBNZ have the responsibility of responding to transfer applications within 10 working days.