

CUMANN LÚTHCHLEAS GAEL
COISTE THÍR EOGHAIN



FOIRM CEAD AISTRITHE
Transfer Application Form

IARRTAS (Application)

Is mian liom aistriú ó _____ **(Present Club)**
(I wish to transfer from)

go Club _____ **(New Club)**
(to new Club)

mar a bhfuilim ag obair / im'chomhnai / no _____
where I am working / living / or

Player's Name: _____ **Date of Birth:** _____

Uimhir Ballraíochta (Membership No.): _____

Address: _____

_____ **Postcode:** _____

Phone: _____ **Email:** _____

Sínithe ag an imreoir ag lorg an aistriú: _____ **(Irish)**

Signed by the player seeking transfer: _____ **(English)**

Sínithe ag Rúnaí an Chlub ag lorg an aistriú: _____
(Signed by Club Secretary seeking transfer)

Dáta: _____

Sínithe ag Rúnaí an Chlub gur leis é an t-imreoir: _____
(Signed by Secretary of Club to which player belongs)

Dáta: _____

- ❖ **Transfer applications between Clubs within Tír Eoghain must be submitted to Rúnaí an Chontae not later than 1st March.**

FOR OFFICIAL USE

Date Received: _____ CCC Recommendation: _____

Date of Ratification by County Committee: _____

Síithe: _____ Rúnaí Choiste Chontae