



BASEBALL WA
JUNIOR CLUB TRANSFER CLEARANCE FORM



GIVEN NAMES: _____ SURNAME: _____

ADDRESS: _____

SUBURB or TOWN: _____ POSTCODE: _____

DATE of BIRTH: ____/____/____ GENDER: MALE FEMALE Non-Binary

PH Mum _____ PH Dad _____

EMAIL: _____

REQUEST FOR TRNFER FROM ANOTHER CLUB

FORMER CLUB: _____

REASON FOR CLEARANCE: (Mandatory) _____

Senior League, Junior League & Little League of Age Players acknowledgment statement:

I ACKNOWLEDGE THAT MY CHILD IS INELIGIBLE TO PLAY FOR A CHARTER STATE CHAMPIONSHIP TEAM FOR 12 MONTHS IF MY CHILD TRANSFER TO A CLUB OUTSIDE OF MY CURRENT CHARTER AREA.

PARENT/GUARDIAN SIGNATURE: _____

A request can be made to the outgoing Charter regarding the ineligibility to play Charter Championships for 12 months for a Charter Clearance. Charter Clearances. Club Registrar's can help you with a charter clearance form.

FORMER CLUB Registrars Name _____ Signature _____ Date ____/____/____
Please Circle as applicable - The above player has been **GRANTED / REFUSED** Transfer by the former Club

PLEASE STATE WHY THE CLEARNCE IS REFUSED:

PLAYER NAME IF 18 YEARS OF AGE _____

PARENT/GUARDIAN NAME IF U18 _____ **SIGNATURE** X _____

ACCEPTED FOR AND BEHALF OF BWA BY THE REGISTRAR OF:

(Baseball Clubs name) _____ **BASEBALL CLUB**

NAME _____ SIGNATURE: _____

(New Club Registrar's Name)

DATE: ____/____/____