

D



APPLICATION FOR TRANSFER

(Foreign players with no Under 21 league club in the country)

MEN Under 21

SEASON (e.g. 2019/2020): ____ / ____

Family, First Name of player: _____

ID Number ICSD: Yes No **if yes, Number:** _____

Nationality: _____ **European:** Yes No

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|---|
| <p><u>Consent/Approval of player</u></p> <p><u>New club:</u> _____</p> <p style="text-align: right;">(Signature of Player)</p> |
| <p style="text-align: center;">CONSENT / APPROVAL</p> <p style="text-align: center;"><u>Club:</u></p> <p style="text-align: center;">_____</p> <p style="text-align: center;">(Signature / Stamp club)</p> |
| <p style="text-align: center;"><u>National Federation for the club:</u></p> <p style="text-align: center;">_____</p> <p style="text-align: center;">(Signature / Stamp National Federation for the club)</p> |

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|---|
| <p><u>Consent/Approval of country</u></p> <p><u>belonging to the player's passport:</u></p> <p style="text-align: right;">(Signature / Stamp National Federation)</p> |
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- No player shall be eligible to play for two or more futsal/football clubs at the same time in any one season.
- DCL Futsal rules: <http://www.deafchampionsleague.eu/rules/9-futsal>
- DCL Football rules: <http://www.deafchampionsleague.eu/rules/8-football>

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