



# TEAM OFFICIAL TRANSFER FORM

## MEMBER-TO-MEMBER TRANSFER

### TEAM OFFICIAL INFORMATION

Coach ID #: \_\_\_\_\_ Birthdate (YY-MM-DD): \_\_\_\_\_

Surname: \_\_\_\_\_ Given Names: \_\_\_\_\_

Current Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Phone Number: \_\_\_\_\_

### RELEASING TEAM/CLUB INFORMATION

Boys or Girls: \_\_\_\_\_ Age Group and Tier(s): \_\_\_\_\_ Name of team(s): \_\_\_\_\_

Print Name of Releasing Member Club President or Registrar: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### RECEIVING TEAM/CLUB INFORMATION

Boys or Girls: \_\_\_\_\_ Age Group and Tier(s): \_\_\_\_\_ Name of team(s): \_\_\_\_\_

Print Name of Receiving Member Club President or Registrar: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### REASON FOR THE TRANSFER REQUEST:

**CMSA Authorization Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

If any of the above information is missing, the transfer will automatically be declined.  
Please refer CMSA Rules and Regulations on restrictions regarding Team Official transfers.