

## Greater Eastside Junior Football Association Player Transfer Request Form

### PLAYER INFORMATION

Name: \_\_\_\_\_ Birth date: \_\_\_\_\_  
 Age Points: \_\_\_\_\_ Approx weight: \_\_\_\_\_ Playing Level: \_\_\_\_\_  
 New Player: \_\_\_\_\_ Returning player: \_\_\_\_\_  
Check if applicable List the System and Level at which played last year

### TRANSFER INFORMATION

From Residing System: \_\_\_\_\_  
 To Requested System: \_\_\_\_\_

The Grievance Committee is asked to approve this change of Systems. The above named player is requesting a transfer to a system other than as assigned in the GEJFA Rules & Regulations. The transfer is requested for the following reason(s):

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

We acknowledge that, if this transfer is approved, it will be good only for the upcoming season.

Requested by: \_\_\_\_\_  
Print Parent/Guardian Name

Parent/Guardian signature: \_\_\_\_\_ Date: \_\_\_\_\_

### SYSTEM APPROVAL

Residing System President: \_\_\_\_\_ Date: \_\_\_\_\_  
 Requested System President: \_\_\_\_\_ Date: \_\_\_\_\_

### GREIVANCE COMMITTEE ACTION

(Approved) or (Denied)

Grievance Committee Rep.: \_\_\_\_\_ Date: \_\_\_\_\_

Reason for denial: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**ATTACH COPY OF APPROVED DOCUMENTS TO MASTER ROSTER**