Queensland Indoor Bowling Association Inc

PLAYER TRANSFER REQUEST FORM

CLEARANCE FROM		Association.
We hereby release		from membership
of this Association, and requests that	the player be transferred to the memb	ership list of
		Association,
Subject to the approval of that associa	ation.	
Yours sincerely,		
Secretary	Date	
		Association
=======================================	=======================================	=======
ACCEPTANCE TO		Association.
We hereby accept	as a tra	ansferred member
from		Association.
Yours sincerely,		
Secretary	Date	·
		Association

THIS FORM TO BE COMPLETED BY BOTH ASSOCIATIONS, AND RETURNED TO THE QIBA SECRETARY BY THE SECRETARY OF THE ACCEPTING ASSOCIATION:

Janet Stockel
QIBA Secretary
PO Box 1131, Caloundra QLD 4551