Junior State Cup - North

# Player Transfer Request

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| **TO:** |  | | | | | Touch Association |
| **FROM:** |  | | | | | Touch Association |
| **RE:** | Player/s Transfer Clearance Request | | | | | |
| **DATE:** |  | / |  | / |  |  |
| **CC:** | North Queensland Touch Association Inc. | | | | | |

**To Whom It May Concern:**

Please be advised that the below-named player/s have requested a ‘Transfer Clearance’ from our Association, to allow them to participate at the NQ Junior State Cup North for your Association. This clearance was requested to take effect for the 2024 Junior State Cup - North to be held on the 12th, 13th and 14th April 2024.

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| **NAME** |  | **DECISION** |
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Our Association has chosen this course of action due to the following reason/s:

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Kind Regards,  
**Association Official**

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| **NAME:** |  |
| **SIGNATURE:** |  |

**Due Date 2nd April 2024**