



Lacrosse WA
Unit 115/396 Scarborough Beach Road, West Point Centre, Osborne Park WA 6017
Postal Address PO Box 1633, Osborne Park WA 6916
Telephone 08 9444 0008
Email executive@lacrossewa.com.au **Website** www.lacrossewa.com.au

INTERCLUB TRANSFER APPLICATION

LWA7

Date _____

PLAYER'S NAME _____

ADDRESS _____

POSTCODE _____

I hereby apply for a clearance from _____ Lacrosse Club
to _____ Lacrosse Club.

SIGNED _____

DATE _____

CLEARING CLUB

ACCEPTING CLUB

_____ Lacrosse Club

_____ Lacrosse Club

*approve/reject this transfer application.

hereby accepts this new member.

SIGNED _____

SIGNED _____

DATE _____

DATE _____

OFFICE HELD _____

OFFICE HELD _____

LACROSSE WA

This application was tabled at the Board Meeting _____ and was duly
accepted/rejected.

SIGNED _____

DATE _____

OFFICE HELD _____

This transfer form must be signed by all parties concerned and submitted in triplicate before 4pm on the
Wednesday prior to the fixture in which the player wishes to play. Refer to LWA Rule H4.

Please forward to:

executive@lacrossewa.com.au