

1.	PLAYER name:	Date:
<input type="checkbox"/> I have not played or had a license for two years Birth Date: _____ E-mail: _____ <small>Day / Month / Year</small> Phone: _____ Signature: _____ NOTE! If the player is under 18 years, approval from a parent/guardian is required! Guardian's Signature (and name in print): _____		
2.	RECEIVING CLUB name:	
CHOOSE ONE: Player will play in Women's League Men's League Country: _____ IFF Member Associations ranking _____ Address: _____ E-mail: _____ Function: _____ Date: _____ Signature: _____ / _____ <div style="text-align: right;">Name in print</div>		
3.	GIVING CLUB name:	
Address: _____ E-mail: _____ Function: _____ Date: _____ Signature: _____ / _____ <div style="text-align: right;">Name in print</div> Reasons if not signed: _____		
4.	NATIONAL ASSOCIATION of the Giving Club:	
Arrival Date:	Approved Disapproved Player has not played/had a license for two years	E-mail: _____ Function: _____ Date: _____ Signature: _____ / _____ <div style="text-align: right;">Name in print</div> Reasons if not signed: _____
5.	INTERNATIONAL FLOORBALL FEDERATION	
Arrival Date:	Approved Disapproved Fee Paid: _____ (Payment date)	Reasons if disapproved: _____ Valid from: _____ Signature: _____ / _____ <div style="text-align: right;">Name in print</div>
<p>Send by E-mail to: transfer@floorball.sport AFTER all required approvals (1 - 4) are in place! Pay the fee, 220 CHF (or 330 CHF for express handling) or 110 CHF if RECEIVING CLUB's IFF Member Association is ranked outside the 25 in the official WFC IFF ranking, to IFF bank account #: 0818-559200-11 at Credit Suisse, CH-8700 Küsnacht, Switzerland. Remember to mark the player's name to the info field! Swift Code: CRESCHZZ80A / IBAN: CH52 0483 5055 9200 1100 0</p>		