



2017 AVL INTER FRANCHISE TRANSFER

I, _____ hereby apply for a CLEARANCE to play for another AVL Franchise

(Print Player Full Name)

Transferring from _____ AVL Franchise, State _____

To _____ AVL Franchise, State _____

Signature of Player <Guardian (if under 18 years of age)> **Date**

1. Any mutually agreed conditions relating to this Permit must be outlined below.
2. Any AVL Franchise receiving an application for a "Permit" must immediately confirm receipt of the application to the AVL Franchise and the Applicant.
3. Any AVL Franchise receiving an application for a "Permit" must consider the application and inform the applicant in writing of the outcome within fourteen (14) days of receiving the application. If a decision is not made within the 14 day period, the application will be deemed approved.
4. All Certificate of Permit **MUST** be completed before a player can play for the new AVL team.

*** Certificate of Clearance ***

I, _____ certify that _____

Franchise President

AVL Franchise

(Has/has not)* approved of the above transfer **delete as appropriate*

Signature of Franchise President **Date**

EXTRA CONDITIONS APPLY TO THIS PERMIT

Yes/No (If yes, please give details)

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Signature of Applicant
<Guardian (if under 18 years of age)>

Signature of Franchise President

**** Approved Permits must accompany team registration forms***