

COVENTRY NINE PIN SKITTLE LEAGUE  
REQUEST FOR PLAYER TRANSFER

Name: \_\_\_\_\_ Date of Request: \_\_\_\_\_

Requests to Transfer From: \_\_\_\_\_

To: \_\_\_\_\_

Signature of Current Team Captain:

I Agree to the above change

Signature of New Team Captain:

This request to reach the fixture secretary 14 days prior to playing in the new team.  
This request can be left in the score box.

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