

SEASON 2020

FOOTBALL MEMBERSHIP TRANSFER FORM

ADELAIDE OVAL FOOTBALL MEMBER SERVICES MAY IN ITS DISCRETION ALLOW A PERMANENT TRANSFER OF MEMBERSHIP INTO THE NAME OF AN IMMEDIATE FAMILY MEMBER ONLY. MEMBERSHIP CANNOT BE TRANSFERRED INTO ANY OTHER PERSON'S NAME OR CORPORATION NAME.

YOUR DETAILS

Member Number: _____ **Surname/Company:** _____
Given names: _____ **Date of birth:** / /
Postal address: _____
State: _____ **Postcode:** _____
Email: _____ @ _____
PHONE **Mobile:** _____ **Business:** _____ **Home:** _____

Reason for transfer:

I hereby declare that I am currently a financial Adelaide Oval Football Member and I grant the AOSMA permission to transfer my membership to the undersigned.

Signature:

NEW MEMBER DETAILS

Surname/Company: _____
Given names: _____ **Date of birth:** / /
Postal address: _____
State: _____ **Postcode:** _____
Email: _____ @ _____
PHONE **Mobile:** _____ **Business:** _____ **Home:** _____

Signature:

Please send your completed form to:

footballmembership@adelaideoval.com.au

or Adelaide Oval Football Member Services, PO Box 900 North Adelaide SA 5006

OFFICE USE ONLY

Approved: **YES** **NO** **Date:** / /