



P O BOX 613, NORTHLANDS, 2116
TEL: 011 442 8056
E-MAIL: jennifer@squashsa.co.za

PROVINCIAL ELIGIBILITY TRANSFER FORM

The following form must be submitted to SA Squash by 1 March 2023 and must be signed by the Chairman of both provinces concerned.

Name and Surname of Player	
Squash SA Registration No.	
Residential Address:	
ID Number:	
Cell:	
Email:	
Current Province (transfer from):	
New Province (transfer to)	

Signed by both chairmen to indicate that they agree to the transfer:

Provincial Chairperson (transfer from)	Transferring Player	Provincial Chairperson (transfer to)
Date:	Date:	Date: