

## **CYPRUS FOOTBALL ASSOCIATION**

## **APPLICATION:**

## ENGAGE A PLAYER PERMANENTLY WITH A TRANSFER AGREEMENT WOMEN

CYPRUS FOOTBALL AS	SOCIATION						
The undersigned player	:						
NAME	SURNAM	ME	FATHER'S NAME		MOTHER'S NAME		
DATE OF BIRTH	NATIONALITY	PLACE OF	BIRTH	ID NO. / PASSPOR	RT NO.	F NO. JOB	
I. the holder of the CFA	Card No	in favor o	of the Clu	  b			
	the Club						
Date	Signature:						
We confirm that we au	thorize the transfer of the	e above player	to the Cl	ub			
	CLUB NAME						
(Stamp)	Signature:		Signature:				
	Full Name:		Full Name:				
Date	President			General Secretary			
	ticity of the above player resolution and recent pla	_					
		CLUB NAME					
(Stamp)	Signature:	Signature:					
	Full Name:		Full Name:				
		esident		Ge	eneral Sec	cretary	
Date							

NOTE: An application that is not properly completed, or that is not accompanied by the information mentioned therein, or that is not submitted via Comet, will be considered as not received by CFA and will be returned through Comet.

By completing and submitting this document, you consent to the collection and processing of any personal data that is necessary for the purposes of issuing a CFA ID card and registration in the CFA registry of players. This processing is based on CFA's legitimate interests to ensure that each participant agrees with the terms and provisions of the Proclamations of the Competitions, in accordance with the General Data Protection Regulation 2016/679 ("GDPR") and the Cyprus Law on Personal Data Protection 125(I)2018.