

## APPLICATION: ENGAGE AN AMATEUR PLAYER PERMANENTLY

## TO CYPRUS FOOTBALL ASSOCIATION

The undersigned player:

NAME		SURNAME		FATHER'S NAME		MOTHER'S NAME	
	-						
DATE OF BIRTH	I	NATIONALITY	PLACE C	OF BIRTH	ID NO. / PASSPO	RT NO.	JOB

I, the holder of the CFA Card No in favor of t	the Club
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request the transfer to the Club .....

THE APPLICANT

Signature: .....

Date	
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We confirm the authenticity of the above player's signature and the accuracy of his statement and we forward the application with a high resolution and recent player's photo. Please proceed with the approval of transfer to our Club.

		CLUB NAME
(Stamp)	Signature:	. Signature:
	Full Name: President	Full Name: General Secretary
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.