



No.
(for League Use Only)

**Form For The Cancellation
Of Player Registration**

Name of League: **EAGLE BITTER UNITED COUNTIES FOOTBALL LEAGUE**

To: The Registration Secretary, United Counties Football League

From _____ Football Club

Date _____

Please note the **CONTRACT * / NON CONTRACT * / TEMPORARY TRANSFER** Registration
(*delete whichever is inapplicable)

of the following player _____

was cancelled on the _____ (Please enter date of cancellation)

Signed _____ Club Secretary

Signed _____ Player

Club _____ Football Club

Date _____

This form must be immediately sent to the Registration Secretary once completed

This form can not be used to circumvent the League rules relating to the transfer of players