

Attach a copy of the player's passport to this document.



ההתאחדות לכדורגל בישראל
Israel Football Association

Cancellation of Player Registration from our Clubs' Players List

1. Player's Details:

Date of Birth	Passport No.	Player's name	Player's Surname

2. We, the authorized signatories of club _____, hereby irrevocably confirm the cancellation of the registration of the above mentioned player from the clubs' players list. (Two signatures are required)

Name	Date	Signature

Player's confirmation & Signature

3. a. I the undersigned hereby confirm the details in para. 1 above.
b. I confirm that I accept the cancelation of my registration from the players list of club:

Player's full name	Date	Signature

4. Budget Control Authority authorization

