



Herts Senior County League
Founded 1898 – Success with Dignity

Emergency Transfer Form season 2025-2026

Surname: _____ Date of Birth: ____/____/____

First Names: _____ Place of Birth: _____

Address: _____

Post Code: _____ Tel: _____ Email: _____

I wish to be registered as a Non-Contract Player with the club named below. I have read the League’s privacy policy, and I understand the way my personal information will be used.

Player’s Signature: _____ Date: _____

Please register the player named above as a non-contract player for:

CLUB NAME: _____

Club Officer’s Signature: _____ Name of Officer: _____

Position Held: _____

To be completed by Opposition/ Match Official

Section 2 (To be completed by the witnessing officer of the registering club who must ensure that the above section is completed before submitting this half of the form to the registration secretary of the league)

Signature (Opponent Club Official): _____ Date: _____

Opponent Club Name: _____ Position Held: _____

Section 3: I confirm that the form has been signed by both club officials and witnessed by myself.

Officials Name: _____ Signature of official: _____

Clubs upload to your club portal a photograph of player along with the fully completed form by **Tuesday at 1200hrs** following a weekend match or **48 hours** following a mid-week match, ensuring all information is visible and legible and send them to **maloneyjoanne9@gmail.com**

It is the club’s responsibility to ensure that the player has been registered