## ABQ MASTERPOINT CENTRE

## PLAYERS' DETAILS

Please send some more forms

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O Box 6152, P'MATTA BC P'MATTA 2150	Ш				
BOX 0132, 1 MIII III BC 1 MIII III 2130					

ABF NUMBER	Transfer from Club Number:	
ADI NOMBER	SIGNATURES REQUIRED:	
	CHANGE DETAILS (write changes only; if name has changed, underline)	Player for transfer; MP secretary for deceased player
	ADD to Reports REMOVE from Reports (home clubs always included)	
	PLAYER DECEASED / /20 (sign to confirm death of player)	
itle inits (3-max) firstname (preferred	, 1 only) surname	ABF MASTERPOINT CENTRE USE ONLY
date-of-birth (year optional) gender street no. and name	1	
suburb or town	state postcode	
subulo of town	state postcode	
	NEW PLAYER (has never been issued with an ABF number)	Transfer from Club Number:
ABF NUMBER	ACTIVATE PLAYER (if number unknown, supply additional details)	
	CHANGE DETAILS (write changes only; if name has changed, underline)	SIGNATURES REQUIRED: Player for transfer; MP secretary for deceased player
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	PLAYER DECEASED / /20 (sign to confirm death of player)	ABF MASTERPOINT CENTRE USE ONLY

MASTERPOINT CENTRE

## PLAYERS' DETAILS

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PO Box 6152	P'MATTA	BC P'MATTA	2150

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	CHANGE DETAILS (write changes only;		SIGNATURES REQUIRED:
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	NEW PLAYER (has never been issued wi	th an ABF number)	Transfer from
ABF NUMBER	ACTIVATE PLAYER (if number unknown		Club Number:
	CHANGE DETAILS (write changes only;		SIGNATURES REQUIRED: Player for transfer; MP secretary for deceased player
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date-or-offili (year optional) gender street no. and name			
suburb or town		state postcode	
Supurio di LUWII		postcode	
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Date of Birth are now compulsory! To avoid delays, please include at least Date and Month