

OFFICIAL STUDENT PERMIT

	A PLAYER'	S APPLICATION		
NAME		D.O.B:	/	1
CLUB:		COUNTY: _		
P	LAYER'S STATU	S (HOME COUNTY)		
FOOTBALL:	Junior 🗆	Intermediate	Senior 🗆	
HURLING:	Junior 🗆	Intermediate	Senior 🗆	
I hereby declare that I intend to play fo	r	Club (s) in City		
Country.				
	B R	ULES		
A player who is pursuing a full-time cours with a Club in the European Union country is participating in a recognised program approved by Central Council as per Section	of study, or the n ne of study of a	earest Club if one exists minimum of 12 weeks	, and with his O duration, and th	wn Club, provided he
l hereby	declare that the	above information is t	rue.	
PLAYER'S SIGNATURE:			/	/
	C API	PROVAL		
SIGNED BY CLUB SECRETARY (Europe):		PROVAL	1	
(Europe): SIGNED BY COUNTY SECRETARY			//	/
(Europe):			/	/ / /
(Europe): SIGNED BY COUNTY SECRETARY (Europe): SIGNED BY CLUB SECRETARY			/	/ / /

Please note that the European County Board has derogation from Central Council on using the English language only for this Application Form.