



Official Permit Form
THE GAELIC AND HURLING ASSOCIATION
OF AUSTRALASIA Inc. (G.F.H.A.A.)

**Player from Ireland to play under the
jurisdiction of the G.F.H.A.A.**

Player's Name: _____ D.O.B. ___/___/_____

Australasian Address: _____

_____ Post Code: _____

Mobile Number: _____ Email: _____

Club in Ireland: _____ County: _____

Player Status: Junior Intermediate Senior

I hereby declare that I intend to play for: _____ Club in
_____ City

Signed by Player: _____ Date: _____

Signed by Club Secretary (Australasia): _____ Date: _____

Signed by State Secretary/Registrar (Australasia): _____ Date: _____

Signed by Australasian Secretary: _____ Date: _____

Signed by Club Secretary: _____ Date: _____

Signed by County Secretary: _____ Date: _____

Signed by C.E.O.: _____ Date _____

**ON HER RETURN TO IRELAND SHE WILL BE ENTITLED TO RESUME PLAYING WITH
HER CLUB IN IRELAND ON NOTIFICATION TO THE LGFA OF HER RETURN.**

The original Form must be retained by LGFA