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 Αμφιπόλεως 21,  
 Στρόβολος 2025,  
 Λευκωσία, Κύπρος

ΚΥΠΡΙΑΚΗ  
 ΟΜΟΣΠΟΝΔΙΑ  
 ΚΑΛΑΘΟΣΦΑΙΡΙΣΗΣ

CYPRUS  
 BASKETBALL  
 FEDERATION

**FROM CLUB:** .....

**TO:** CYPRUS BASKETBALL FEDERATION

**PLAYER'S LOC REQUEST TO CYPRUS BASKETBALL FEDERATION**

**PLAYERS NAME AND SURNAME:**.....

.....

**DATE OF BIRTH:** .....

**COUNTRY PREVIOUSLY REGISTERED:** .....

**CLUB PREVIOUSLY REGISTERED:** .....

**PLAYER'S AGENT NAME:** .....

**AGENT'S FIBA LICENCE NUMBER:** .....

Dear Secretary General,

We kindly request the Letter of clearance, for the above mentioned player.

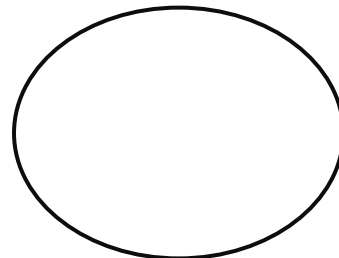
**Date:** .....

**Name and surname:** .....

**Position:** .....

**Signature:** .....

Club's stamp:



ΧΟΡΗΓΟΙ / SPONSORS



ΣΥΝΕΡΓΑΤΕΣ / PARTNERS

