

REGISTRATION FORM

<u>GAME:</u>	<u>Session:</u> 2017-18
<u>COLLEGE:</u>	<u>Section:</u> MEN / WOMEN

(1)			(5)
PHOTO <i>(to be attested by the Principal)</i>		NAME	
		FATHER	
		DOB	
		CLASS	
		REGD. NO.	
Signature of player.....			Signature of player.....
(2)			(6)
PHOTO <i>(to be attested by the Principal)</i>		NAME	
		FATHER	
		DOB	
		CLASS	
		REGD. NO.	
Signature of player.....			Signature of player.....
(3)			(7)
PHOTO <i>(to be attested by the Principal)</i>		NAME	
		FATHER	
		DOB	
		CLASS	
		REGD. NO.	
Signature of player.....			Signature of player.....
(4)			(8)
PHOTO <i>(to be attested by the Principal)</i>		NAME	
		FATHER	
		DOB	
		CLASS	
		REGD. NO.	
Signature of player.....			Signature of player.....
(9)			(10)
PHOTO <i>(to be attested by the Principal)</i>		NAME	
		FATHER	
		DOB	
		CLASS	
		REGD. NO.	
Signature of player.....			Signature of player.....

Signature of Prof./Team Incharge.....

Full Name of Prof./Team Incharge.....

.....
Signature of Principal (with college seal)