

ALL INDIA SPORTS AND EDUCATION FEDERATION

Registration form National Games Championship

Date of Registration: Registration No. AISAEF/.....

Games: State Team :

Age Group:Category:- Boys/Girls/Handicap Players

1. Name Of Participate:

2. Fathers Name:

3. Mother Name:

4. Date Of Birth:

5. Address:

..... Pin Coad:

6. E-mail: Contact No:

7. Name Of Institute/College/School:-

..... Contact No.

8. Adhar Card No.....

Declaration:-

I, hereby declare that the information given by me in this registration form is true and correct. My registration will be cancelled if anything found wrong.

Signature of Participate

N.O.C. Permission By Parents:-

I/We allow my/our Son/Daughter in AISAEF National Games to be held at.....

..... From..... to

AISAEF/Its Member/Judge/Official will not be responsible for any mishappening / accident with my ward.

Signature of Parents

Approval by State Secretary

I hereby declare that I have cheacked all the details ofand found everything correct.

Stam And Signature Of Secretary