

REGISTRATION FORM

IBSA SOUTHERN REGION COACHING CAMP FOR FEMALE ATHLETES

02-08 DECEMBER 2019

1. **Name of the Institution** : _____
Address : _____

Tele No. _____ Fax _____ E-mail _____

2. Details of the sponsored ATHLETE:-

(a) Name : _____
(b) Category : B1/ B2/ B3/
(c) Father's Name : _____
(d) Date of Birth : _____
(e) Educational Qualification : _____

3. KIT Size:-

(a) Track Suit Size : _____
(b) T-Shirt Size : _____
(c) Shorts Size : _____
(d) Shoes Size : _____

4. Details of Arrival/ Departure :

(a) Date of Arrival _____ Train No. & Name _____
Alighting Station _____ Time of Arrival: _____
(Secunderabad / Hyderabad is the nearest Railway Station)

(b) Date of Departure _____ Train No. & Name _____
Departure Station _____ (Secunderabad / Hyderabad)

(Authorized Signatory)

With seal

Note:- Only three female athlete per institutions are allowed to participate in the Camp.