**Registration Form**

[NB: Write down with CAPITAL]

|  |  |  |
| --- | --- | --- |
| **Department Name:** | | **Email :** |
| **Team Manager Name :** | **Cell:** | **Email:** |
| **Captain Name:** | **Cell:** | **Email:** |
| **Sports Event** |  | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **SN** | **Player Name** | **ID** | **Phone No** | **Sign** |
| **1** |  |  |  |  |
| **2** |  |  |  |  |
| **3** |  |  |  |  |
| **4** |  |  |  |  |
| **5** |  |  |  |  |
| **6** |  |  |  |  |
| **7** |  |  |  |  |
| **8** |  |  |  |  |
| **9** |  |  |  |  |
| **10** |  |  |  |  |
| **11** |  |  |  |  |
| **12** |  |  |  |  |

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Signature of Coordination officer

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Signature of Team Manager