



वसई तालुका कला क्रीडा विकास मंडळ (रजि.) आयोजित
वसई तालुका कला-क्रीडा महोत्सव

TALUKA LEVEL BOXING CHAMPIONSHIP

Name of School / Collage : _____

Name of Boxer : _____ Sex : Male / Female

Standard : _____ Date of Birth : _____

Address : _____

Boxer Contact Number : (Mob.) _____

Boxer Email ID Details : _____

Name of Basic Coach : _____

Name of Current Coach : _____

Current Coach Contact Number : _____

Parents & Boxer Undertaken

We are parents have permitted our daughter / Son _____ to participate in Taluka level boxing championship at our own will & risk. We / I (in case of above 18 Yrs.) indemnify the above mentioned Championship members for any kind of mishap or accident during Championship. Our ward will / I shall follow discipline and will act only as per his/her/my coaches & referee during this Championship.

Declaration By Father

Declaration By Mother

Declaration By Boxer

School / College or Club Undertaken

Above mention Date of birth & Address details of boxers are Boxer & College or Club details are true with our risk if found the championship members can cancel his / her entry.

Declaration By School / College Principal with Seal

Declaration By Club Coach & Seal

Note : Kindly attached Current Medical Examination Report True Copy of Ration Card / Current School or College or Club ID of Vasai, Virar, Nallasopara, Naigaon Locations Only.

Entry Fee Rs. 30/- each