



IDP-IELTS-CRYcket 2023-24 Registration Form



Name of Team		Contact Tel. No.	Mob. No.	Email ID.
Category	U12 / U14			
Name of Coach				
Name of Manager				

Sl. No.	Name of Player	Date of Birth	Civil ID No.	Contact Tel. No.	Mob. No.	Email ID.	Remarks
1							
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We declare that the particulars given above have been verified by us and are correct. We are aware of the condition that if any information given above are found to be incorrect, it may lead to the disqualification of ourselves / team from the tournament / CRYcket

Sig. of Captain		Signature of Coach		Signature of Manager	
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FOR OFFICIAL USE ONLY

Time of Receipt		Date of Receipt		Name & Signature of Receiver	
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