VALIDITY WILL COMMENCE W.E.F. 1ST JAN OF THE YEAR OF REGISTRATION TILL 31ST DECEMBER OF THE 3RD YEAR



A.A.T.A. PLAYERS REGISTRATION FORM ALL ASSAM TENNIS ASSOCIATION

Affix two passport size photographs

NAME :							
SURN		DLE NAME	FIRS	T NAME			
Sex: Male	Female	D	ate of Birth :	// DD MM			
Father/Husband/Gua	ardian's Full Name :_				,		
Permanent Address	<u> </u>						
	St	ate		PIN:			
Correspondence Ado							
	St	ate		PIN:			
Contact Nos.:							
Tel. No.:							
Rs							
payable at Guwahat	• •	e Registration eques and no bees one thou	form duly fille cash) in favou sand five hun	ed and sigr of all Ass dred) only	ned with E am Tenni be sent t	Bank D s Assc	emand ciation
I hereby und take that I will produ when Required.	lertake that the infor ce Original Certificat		•	•			
	Signature of Pare	nts	_	Signature	of Player	-	
Note: It is compuls State Ranking Tourr	ory for all players to nament will be refuse	•				entry	to any
(For Office Use) For	m No. Re	eceipt No.	Date :		Amount		