INDO AMATEUR GO ASSOCIATION

ENTRY FORM

NAME OF ASSOCIA	ATION					
IAME OF CHAMP	ONSHIP					
/ENUE		DATED	То	Year	CATEGORY_	
STATE	EVENT		AGE GROUP		F/Y	
R.NO.	NAME	FATHER'S NAME	MOTHER'S NAME	D.O.B	AADHAR NO.	MOBILE
1.						
2.						
3.						
4.						
5.						
6.						
СОАСН						
OFFICIAL						
	-	by me is true and correct to th Go Association will be acceptal	•	y discrepancy is fou	nd in any of the details	given, any kind o
ame		Designation		Contact n	o	

Seal & Signature