

INDO AMATEUR GO ASSOCIATION
Player Registration Form

Year _____ New/ Transfer _____
Name of Championship _____
Name of Association _____
State _____ Dist. _____



Name _____

Father's Name _____

Mother's Name _____

Occupation _____ D.O.B. _____ Aadhar No _____

Contact No. _____ WhatsApp No. _____

Email id _____

Present Address _____

Permanent Address _____

Registration required as a player/ Coach/ Umpire/ Referee/ Technical officials.

Declaration

I declare that the above entry has been filled by me is true and correct to the best of my knowledge. If any discrepancy is found in any of the details given, any kind of punitive/legal action taken by Indo Amateur Go Association will be acceptable to me.

Approval By State/Unit

On behalf of _____ Mr./Mrs./Ms. _____ is forwarded for registration as a player of IAGA.

Sign. (President/Secretary

Office Use only

IAGA Registration No. IAGA/ _____ / _____ is allotted to Mr _____

President/Secretary

IAGA

