

TECHNICAL OFFICIAL REGISTRATION FORM

1. Personal Details:

Full Name (same as pass port)

First _____ Middle _____ Surname _____

Sex : _____ Date of birth : D ____ M ____ Y _____ Nationality: _____

2. Passport Details: (attach PP copy)

Number : _____ Place of Issue : _____

Date of Issue : _____ Date of Expiry : _____

3. Contact information : (with city & code no.)

a. Permanent / Mailing Address : _____

Phone No. : _____ Fax No. : _____

Mob. No. : _____ E-mail : _____

b. Work Address: _____

Phone No. : _____ Fax No. : _____

Mob. No. : _____ E-mail : _____

Website : _____

4. Other Informations:

a. Profession / Occupation : _____

b. Mother Tongue: _____

c. Fluency in Mother language:

i) Speaking Fluent Fair Weak

ii) Writing Fluent Fair Weak

d. Fluency in English

i) Speaking Fluent Fair Weak

ii) Writing Fluent Fair Weak

e. Other languages known: _____

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5. Details of Training / Courses etc passed
(Attach certificates along with Bio-Data)

I will abide by the rules and regulations set by the World Kabaddi Federation (WKF).

I acknowledge that I assume the risk for any personal injury I sustain before, during or after the game and that I will not hold liable the organizers, the teams or the WKF.

Date : _____

Applicant's Signature



FOR OFFICIAL USE ONLY

TECHNICAL OFFICIAL LICENCE NUMBER

Date of registration / Exam : _____ Receipt No : _____

Licence issued on : _____ Grade/ Level _____

Validity date: from _____ to _____

Signature _____ Designation _____