



WORLD KABADDI FEDERATION (WKF)



Organization in Special Consultative status with the United Nations Economic and Social Council

FRIENDS OF KABADDI GOLD / SILVER Membership Form

Photo

1. Name: Sex:

2. Date of Birth: Birth Place:

3. Father's name:

4. Nationality: Passport No:

5. Address :

Present address:

City State Zip code

Telephone Number: / /

(Country code - Area code - Number)

Email:

Permanent address:

City State Zip code

6. Please write below your experience or relation with Kabaddi such as:

Official/ Coach / Referee/ Player /member of Association/ Club member etc..

Two blank lines for experience or relation.

I agree to abide by the constitution and by-laws & Rules of the World Kabaddi Federation.

Please find herewith the contribution of Rupees thirty thousand (Approx.US\$ 462.00) OR contribution of Rupees fifteen thousand (Approx.US\$ 231.00) by Bank transfer towards Annual GOLD / SILVER Membership fee for Friends of Kabaddi along with my ID and Address proof.

Date:

Applicants signature

FOR OFFICE USE ONLY

Membership No: Receipt. No: Date of Admission:

ID: ID No:

ID: ID No: