

1.

Name of State/UT

## HIMACHAL PRADESH YOGASANA SPORTS ASSOCIATION

(Registered under H.P. Societies Registration Act, 2006)

Affiliated to National Yogasana Sports Federation - NYSF

Recognized by Min. of Youth Affairs & Sports, Govt. of India Office Address: Divya Kunj, New Totu, Shimla -171011
Email: officialhpysa@gmail.com

## REGISTRATION FORM RISK CERTIFICATE/DECLARATION/UNDERTAKING

2. 3. 4. 5. 6.	Name of State/UT Association  Name of the Athlete (In Capital letters)  Date of Birth (DD.MM.YYYY)  Athlete Registration No.  Father's Name  Address		M	Mobile lother's I		Gender	PHOTO  Male/Female
4. 5. 6.	Name of the Athlete (In Capital letters)  Date of Birth (DD.MM.YYYY)  Athlete Registration No.  Father's Name		M			Gender	Male/Female
5. 6.	(DD.MM.YYYY) Athlete Registration No. Father's Name		M			Gender	Male/Female
6.	Athlete Registration No. Father's Name		M			1 1	
			N	lother's I			
7.	Address				Name		
8.	Email				Age Group		
9.	Events	1. 2. 3.		•			
10.	Document Type	Aadhar Card/ Pan Car	d/ Voter ID/P	assport/	Driving Lic	ence	
11.	Document No.						
12.	Name of Competition	4 <sup>th</sup> Sub Junior, Junio Pandoh, Mandi.	r & Senior H.	P. State	e Yogasana	Sports Chan	npionship 2023,
of the Him	nachal Pradesh Yogasana S	ports Association, and r	nyself alone	will be r	esponsible	for any unt	oward incidence, if
-	during travelling or during p neither the Himachal Prade ncidence.				•	•	•
	RE & SEAL OF AUTHORITY YOGASANA SPORTS ASSOC	IATION	9	SIGNATI	JRE OF ATH	ILETE/ PAREN	IT/GUARDIAN

DATED.....