LAGORI ASSOCIATION OF PLAYER'S PROFILE FORM OF						
Category	Session :	Date :				
Venue :						

SI NO.	NAME (BLOCK LETTER)	DATE OF BIRTH (DD/MM/YY)	NAME OF SCHOOL/ COLLEGE/ PROFESSION	PERMANENT ADDRESS CONTACT NO & EMAIL-ID	REG. NO.
1	PLAYER : FATHER : AADHAR NO:				
2	PLAYER : FATHER : AADHAR NO:				
3	PLAYER : FATHER : AADHAR NO:				
4	PLAYER : FATHER : AADHAR NO:				
5	PLAYER : FATHER : AADHAR NO:				
6	PLAYER : FATHER : AADHAR NO:				
7	PLAYER : FATHER : AADHAR NO:				
8	PLAYER : FATHER : AADHAR NO:				

9	PLAYER : FATHER : AADHAR NO:							
10	PLAYER : FATHER : AADHAR NO:							
11	PLAYER : FATHER : AADHAR NO:							
12	PLAYER : FATHER : AADHAR NO:							
13	PLAYER : FATHER : AADHAR NO:							
14	PLAYER : FATHER : AADHAR NO:							
15	PLAYER : FATHER : AADHAR NO:							
FOR COA	CH/MANAGER							
1	COACH: FATHER : AADHAR NO:							
2	MANAGER : FATHER : AADHAR NO:							
	Declaration : I/we do solemnly affirm and declare that the information given above are true and correct to the best of our knowledge and belief, nothing has been concealed. If the above information in full or part is four incorrect, NFI is liable to take any action against the players and our state unit. I/we also under take to abide all the guidance as prescribed under the rules and regulation of Lagori Association of							
	I/we also under take to abide all t	he guidance as pro	escribed under the ru	les and regulation of Lagori Associ	atio			

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