



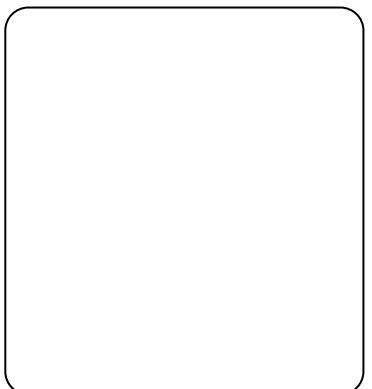
PLAYER REGISTRATION FORM

| | |
|-------------------------|--------------|
| Full Name: | |
| Father Name : | |
| Email ID : | |
| DOB: | Gender: |
| Phone no: | Whatsapp No: |
| Street Address: | |
| Apartment, suite, etc : | |
| City: | State: |
| Postal Code: | Country: |
| Aadhar Card No: | |
| Name of Club: | |
| Coach Name: | Coach ID: |

Consent & Declaration

- I hereby declare that all the above information is true to the best of my knowledge.
- I understand that Nunchaku is a martial art sport and may involve physical contact and risk.
- I give full consent for my child/self to participate in training and tournaments organized by the Nunchaku Association of India.
- I authorize the association to use the submitted photograph/video for promotional and record-keeping purposes.

PLAYER PHOTO



Player Signature: _____

Parent/Guardian Signature (if minor): _____

Date: _____

Coach Signature: _____