



# CHARUTAR VIDYA MANDAL

CVM INTERNATIONAL FOOTBALL TOURNAMENT U -12



NAME & ADDRESS OF THE SCHOOL: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

SCHOOL EMAIL ID: \_\_\_\_\_ TEL: \_\_\_\_\_

NAME OF THE COACH: \_\_\_\_\_ TEL: \_\_\_\_\_

BOYS / GIRLS AGES: \_\_\_\_\_ JERSEY COLOURS: \_\_\_\_\_

SR. NO	LD. NO	SURNAME	NAME	FATHER'S NAME	DATE OF BIRTH	SIGNATURE OF PLAYERS
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						

I here by certify that :

- 1.)The above players are bonafide students of the school
- 2.)Their general registration number and date of birth are exactly as entered in the school general register.

Principal's Signature  
School Seal