



ދިވެހިސަރުކާރުގެ ގެޒެޓް  
**BADMINTON ASSOCIATION OF MALDIVES**

**17th INTER SCHOOL BADMINTON TOURNAMENT 2020**

**Greater Male' Zone / Central Zone (6th-14th March 2020 - Male Kulhivaru Ekuveni)**

**TEAM LIST APPLICATION FORM**

**PLEASE USE BLOCK LETTERS**

Circle Here →

Under - 15		Under - 17		Under - 19	
GIRLS	BOYS	GIRLS	BOYS	GIRLS	BOYS

**School :** \_\_\_\_\_

<b>School Authorised Personnel</b>	Name :		[ SCHOOL Stamp ]
	Email Address :		
	Designation :		
	<b>Contacts :</b>	Mobile : _____ Office / Home : _____	

**Players**

#	ID#	Name	Address	Date of Birth			Contact No.
				Day	Month	Year	
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							

Team Officials	NAME	e-mail:	Contact No.
COACH			
MANAGER			

* BAM will be Coordinating with Focal Points / MANAGERS for further Clarifications * Must Include <b>minimum 7 players in team event</b> , For Players Eligibility, refer to Inter School Badminton Tournament Rules * list the players names as in ID card according & ensure to submit the form on or before <b>23rd February 2020 [ 14:00hrs ]</b> * <b>Incomplete duplicate forms may not be accepted.</b> * <b>COMPULSARY to ATTACH ID CARD COPY WITH PHOTO [ Page: 2 ]</b>	<b>for BAM use only:</b> Received by : Name _____ Received Date : _____ Received Time : _____ Signature : _____	[ BAM Stamp ]
--	---	---------------

<b>* For more information please Call 3314057</b>	<b>* U15 - Born on or After 2006</b> <b>* U17 - Born on or After 2004</b> <b>* U19 - Born on or After 2002</b>
---	--

