

SHEOHAR DISTRICT CRICKET ASSOCIATION

(Affiliated to Bihar Cricket Association, Patna)

WARD NO- 15, SHEOHAR, PIN- 843329 (BIHAR)

PLAYER'S REGISTRATION FORM (Session-2021-22)

Mother's Name Mother, (As In Govt. Certificates) Addra Number Blood Group Correspondence Address Correspondence Address Mother's App No Permanent Address Mother's App No Proficiency Details (Please tick on right option): BATTING BATTING BATTING BATTING BATTING BOWLING RH LH RIGHT ARM BATTING ALL ROUNDER OR BOWLING TYPE OR OR BOWLING ALL ROUNDER I. Birth Certificate Number (computerised only): Issued By: Date:				_					
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Mother's Name Date of Birth (As in Govt-Certificates) :		Name o	f the Player		:				
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Date of Birth (As in Govt. Certificates):		Mother's Name			,				
. Addhar Number . Blood Group . Permanent Address . Correspondence Address . Contact Details . What's App No	١.	Date of	Birth (As In Govt.	Certificates)	·	//	Ger	nder:- M / F	
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1. Birth Certificate Number (computerised only):		RH	LH	RIGHT AF	RM	LEFT A	RM		
4. Parent's Aadhar Number : Father		RH BATTIN	CH G ORDER MIDDLE	FAST	BOWLING	<i>LEFT A</i> G TYPE		BATTING ALL ROUNDER OR	
5. PAN Number :	1.	RH BATTIN OPEN Birth C	LH G ORDER MIDDLE ertificate Number	FAST	BOWLING M. FAST	OFF SPIN ISSUE BOOK	LEG SPIN ed By :	BATTING ALL ROUNDER OR BOWLING ALL ROUNDER Dat	Batting Order
6. Last Year Played From :	1. 2. 3.	RH BATTIN OPEN Birth C SSC Cel	CCOUNT Details	FAST (Computerised or	BOWLING M. FAST nly):	OFF SPIN Issue Boar	ed By :rd :	BATTING ALL ROUNDER OR BOWLING ALL ROUNDER Dat Passing Year	Batting Order e:
Players are requested to attach self attested photocopies of the supporting documents a. I am willing to play and participate cricket matches and tournaments authorised by Sheohar DCA / BCA or its affiliated members. I shall not participate in any match or tournament which is not registered or approved by Sheohar DCA / BCA, Patna. b. I shall registered myself in only one district. c. I shall not act in a manner which brings disrepute to the game of cricket. I shall abide by the Sheohar DCA / BCA code of conduct. I am aware of if i violate the rules and regulation of Sheohar DCA/BCA. I am liable for the penal action as decided by the Sheohar DCA/BCA. d. I shall abide by the rules and regulations framed time to time by Sheohar DCA and BCA, including regulations for players and rules governing to conduct of the tournament. e. All information given by me in this Player's Registration Form are true and correct.	1. 2. 3. 4.	BATTIN OPEN Birth C SSC Cel Bank A Parent	LH G ORDER MIDDLE ertificate Number rtificate Number account Details 's Aadhar Number	FAST (Computerised or	BOWLING M. FAST nly):	OFF SPIN ISSUE BOOK	LEG SPIN ed By: rd: Bank	BATTING ALL ROUNDER OR BOWLING ALL ROUNDER Dat Passing Year Mother	Batting Order e:
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Office Seal & Signature of Sheohar DCA