



APPLICATION FORM

TATA TRUSTS

FOR ENROLLMENT INTO MIZORAM STATE SPORTS COUNCIL – TATA TRUSTS GRASSROOTS FOOTBALL ACADEMY

CENTRE : _____

DISTRICT : _____

*Attached
Passport size
photo*

1. Name of Applicant
(In Block letters) : _____
2. Father's/Mother's/Guardian's Name : _____
3. Address for Communication : _____

4. Telephone No. (*If any*) : _____
5. Email (*If any*) : _____
6. Permanent Address : _____

7. Educational Standard : _____
8. Date of Birth : _____
9. Gender (Male/Female) : _____

Signature of Trainer : _____

Name of Trainer : _____

SEAL	ADMITTED / NOT ADMITTED <i>Secretary (or Authorized Signatory)</i> Mizoram State Sports Council
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