



ALL INDIA FOOTBALL FEDERATION

BLUE CUBS ARUNACHAL LEAGUE - 2024

Being organized by APFA in collaboration with NEUFC
Supported by AIFF

NAME OF THE CLUB/SCHOOL: _____

CATEGORY : U-12

TEAM REGISTRATION FORM

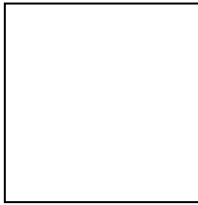
NAME: _____
F/ NAME: _____
DOB: _____
GENDER: BOY/ GIRL (Tick the right option)

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DOB: _____
GENDER: BOY/ GIRL (Tick the right option)

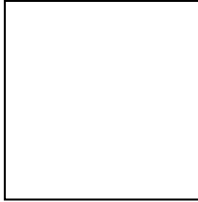
NAME: _____
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DOB: _____
GENDER: BOY/ GIRL (Tick the right option)
CATEGORY: U-7/U-9/U-12

NAME: _____
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DOB: _____
GENDER: BOY/ GIRL (Tick the right option)

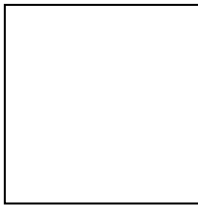
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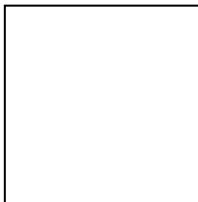
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DOB: _____
GENDER: BOY/ GIRL (Tick the right option)



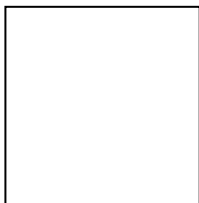
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GENDER: BOY/ GIRL (Tick the right option)



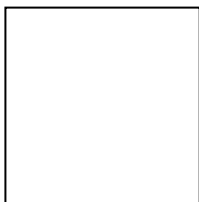
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DOB: _____
GENDER: BOY/ GIRL (Tick the right option)

NAME OF COACH: _____
CONTACT NO.:

NAME OF TEAM MANAGER: _____
CONTACT NO.:

Club Chairman/ Principal
Signature with Seal