



BLUE CUBS ARUNACHAL LEAGUE - 2024

Being organized by APFA in collaboration with NEUFC
Supported by AIFF

PARENT'S CONSENT FORM

To Whom It May Concern

This is to certify that I/We have No Objection whatsoever on My
Ward Mast./Miss
participating in Blue Cubs Arunachal League- 2024 and representing
..... School/Club as player.

I/We declare that he/she is not having any prolong disease which makes him/her unfit to play football and that all the documents submitted to association are legitimate and valid ones. Also, I/We shall not hold Arunachal Pradesh Football Association responsible if any kind of injuries occurred to him/her during camp and championship.

(Signature)

Parent/ Guardian

Name:

Relationship:

Mobile No.:

Address: