



# TELANGANA STATE TENNIS ASSOCIATION

## REGISTRATION FORM

Sex: Male ( ) Female ( ) TSTA Registration Number ( \_\_\_\_\_ )

NAME \_\_\_\_\_

Father/Mother/Guardian's Full Name: \_\_\_\_\_

Permanent Address: \_\_\_\_\_  
\_\_\_\_\_

Occupation Father: \_\_\_\_\_

Tel Residence: \_\_\_\_\_ Mobile: \_\_\_\_\_

E-Mail ID: \_\_\_\_\_

Photograph

Date Of Birth: \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_ AITA ITN No:- \_\_\_\_\_

Note: - Please attach Two Proofs of Date of Birth namely Photocopy of Municipal **Birth Certificate issued by the competent authority within one year of the Child's Birth (Mandatory)** and (School Bonafide certificate on school letterhead with the child's photo attached & principal's signature & stamp or Copy of Passport) along with two latest passport size photographs with Rs 500/- DD in favor of **TELANGANA STATE TENNIS ASSOCIATION** as a Registration for one year.

### DECLARATION

I hereby undertake that the information and documents supplied by me are correct. I undertake that I will produce original certificates indicating my Date of Birth as and when required. I understand that failure of providing original documents or a proof of correct age may lead to a suspension of AITA Registration and a ban from participating in Tennis events in India and this cannot be challenged in any court of law.

\_\_\_\_\_  
Signature of Parents

\_\_\_\_\_  
Signature of Player

(For Office Use) Receipt No.: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Amount: \_\_\_\_\_ MODE: D.D/CASH \_\_\_\_\_ DD Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

AITA COACH REFERRED .....Reg NO.....

NAME OF THE ACADEMY:.....

SIGNATURE:.....