



Registration Form

Name of the student : _____

Father Name : _____

Gender : Boy / Girl

Date of Birth : _____

School & Std : _____

Father Occupation : _____

Home Address : _____

Nearest Landmark : _____

Contact Number : _____

Email address : _____

Known illness if any for the student : _____

Father (whether interested to volunteer): Yes / No

Transportation required : Yes / No

Game preferred : Basketball / Badminton / Volleyball /
Table Tennis / Tennis / Swimming

Signature of Parent: _____

Date : _____



Documents required for registration:

1. Latest 2 passport size photo
2. Passport copy with residence visa page of the student and father.

Terms & Conditions:

- 1) Students to wear sportswear provided by the Academy for the training sessions.
- 2) Valuable items are not to be worn or brought while attending sessions.
- 3) Parents are not allowed to communicate with coaches during training hours.

Declaration:

I further represent and warrant that my child _____ (Name of student) is physically & mentally fit to undergo different activities under the Basket ball program provided by Aspire Sports Academy. I also grant permission to Aspire Sports Academy to use Student's Name, Pictures in various media for the purposes and communication of Aspire Sports Academy during the tenure of the student.

I being the parent of _____ (Name of student) hereby declare that I will not hold responsible the Aspire Sports Academy , management, officials, agents or employees for any loss / damages suffered on account of money / costs, action, person/personal belongings and any kind of medical injuries / disease for me. I am fully aware as to the proper use of the facilities as well as my own physical limitations and agree to indemnify the management of Aspire Sports Academy against any such claims whatsoever through loss or damage to property.

I also assure that we will abide the rules and regulations as laid down by Aspire Sports Academy.

Signature of Parent _____

Date _____