



Bengal Shaolin Kung-Fu State Championship 2024-25

Venue: Naba Tarun Sangha. 120, Raja Rammohan Roy Road. Kolkata: 700041

Website: www.shaolinyoga.in / www.authentickungfu.in E-mail: authenticshaolinyoga@gmail.com

Mobile Number: 9331290417 / 9903715115 / 9836477415 / 6295319355

Player Registration Form

(TO BE FILLED IN BLOCK LETTERS ONLY AND ALL FIELDS ARE MANDATORY)

NAME																			

NAME OF ACADEMY _____

Date Of Birth _____ MOB _____ WhatsApp _____

GENDER _____ HEIGHT _____ WEIGHT _____ AADHAR NUMBER _____

NAME AND TYPE OF TAOLU

BARE HAND FORM	WEAPONS FORM

DECLARATION

1) I, _____ age _____ s/o _____
declare that particulars given above are true to the best of my knowledge and belief.

2) I also declare that I should abide by the rules and regulations and latest amendments and decisions of the Organizing Committee as the case may be and cooperate with the officials in participating in the Championship.

3) I opt for _____ to participate in the Championship.

Note: A participant can participate in any 1 (one) or maximum 2 (two) number of events. Application form need to be submitted with a fee of Rs. 350/- per event.

A discount of Rs. 100/- will be given for those participating in both the events. Payments should be made to the Academy In-Charge while submitting the form.

All Payments made are Non-Returnable.

Signature of the
Participant

Signature of Guardian
(If Participant is Minor)

Signature of the Academy
In-Charge with Stamp

