

<div>WUSHU ASSOCIATION OF WEST BENGAL</div> <div>Affiliated to : Wushu Association of India & Bengal Olympic Association</div> <div>Examination Form</div>					
Name :			PHOTO		
Sex :		Age :			Date of Birth :
Father's Name :					
Address :					
District :		Academy :			
Date of Enrolment :		WAWB ID Card No. :			
KID					
Date of Exam	Place of Exam	Examiner's Name	Rank	Verified By	
BOY					
Date of Exam	Place of Exam	Examiner's Name	Rank	Verified By	
PLAYER					
Date of Exam	Place of Exam	Examiner's Name	Rank	Verified By	

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