



OFFICIAL REGISTRATION RECORD

SCHOOL GAMES AMATEUR FEDERATION



SUMIT

Registration ID: #000030



SCAN TO VERIFY

PERSONAL & CONTACT DETAILS

FATHER'S NAME	Virender	DATE OF BIRTH	2009-02-19
MOTHER'S NAME	Poonam	CONTACT NO.	8571936674
EMAIL	sumittaak405@gmail.com	ADDRESS	Village ikkas District jind 126102

PARTICIPATION INFORMATION

SPORT / GAME	Kabaddi	EVENT TYPE	Kabaddi
AGE CATEGORY	e.g. under 17	WEIGHT CLASS	53

Declaration: I hereby declare that the information provided above is true to the best of my knowledge. I agree to abide by the rules and regulations set forth by the School Games Amateur Federation.