



Team Registration Form

1. Name of the University :
2. University Address :
3. Number of Participant :

1	No of Players	
2	Coach/Team Manager/In Charge	
3	Total	

4. Request for Accommodation (If required): Yes/No
5. Food will be Provided on Request : Yes/No (If Yes Mention the Date)

SNO	DATE
1	
2	
3	
4	

6. Request for Transport : (If required): Yes/No
7. Name of the Coach cum Manager :
8. Contact No:
9. Mail Id:

Date:

Signature of Department of Physical Education  
 With seal

Note:

- Please send one copy of this form immediately by E-mail - [Sports@veltechuniv.edu.in](mailto:Sports@veltechuniv.edu.in) on or before 5<sup>th</sup> October 2016.
- Transports will be provided from Avadi to Vel Tech University.
- Food will be charged of Rs.180 (one hundred and eighty only).

<u>By Accommodation Committee</u>	
Name of the Hostel:	
Room Allotted:	
Date:	
Warden	Committee