	TAMILNADU AMATEUR ROWING ASSOCIATION	(*	
15	Tamilnadu State Rowing Championships 2017			\times	
	3 - 8 October 2017			TARA	ン
	Kodaikanal Boat & Rowing Club Kodaikanal				
PART	ENTRY FORM Before filling the form please ensure that you have read	l the bu	lletin c	arefully	
Α	Entry for Single Sculls [1x] (Tick the relevant boxes) Choose Age Category:				
	 Sub-Junior Junior Your Gender: Male Open Female Masters 				
			Date of		
Γ	Full Name of Participant(Please fill all details in CAPITALS)	dd	mm	уууу	
	(Name to be as in the certificate used to prove date of birth)				
Mob	ile No: Email:				
DADT					I
B	Entry for Double Sculls [2x] or Coxless Pa (Tick the relevant boxes) Choose Boat: 2x 2- Choose Age Category:	irs [2	!-]		
	Under 13 [only 2x]				
	Sub-Junior Junior Your Gender: Male				
	Open Female				
	Masters	Ľ	Date of	Birth	
г	Full Name of Participants (Please fill all details in CAPITALS)	dd	mm	уууу	
Bow					
Stroke					
_	(Names to be as in the certificate used to prove date of birth)				
Mob	ile No: Email:				
	(The mobile no. and email id of one of the participants, representing th	he pair, i	is suffic	ient)	·
	Page 1/2				

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(The mobile no. and email id of one of the participants, represe	enting the	pair, i	s suffic	ient)	
Please tick the relevant box below and fill the details	s:				
I/ we have attached a Demand draft no				_drawn	on
for Rs	/	-			
I/ we have transferred by Paytm to mobile no.9	8405 375	536 at	Re 77	0/-* per (seat
from mobile no.	0100 070	sou al	113.77	$o_{1} = her s$	scut
under the name of					
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2					
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Name & Signature of Parent/Guardian	Signature	of R	morle		
(in case of minor) Date:	Jignatur	. 01 K	5000175		
An Entry fee of Rs.750/- per seat An Entry will be valid only if accompanied by			Entry F	ee	
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