



BADMINTON ASSOCIATION OF INDIA

AGE CERTIFICATE FOR PLAYERS

1. Name in full:

(in Block letters. Surname a Must.)

(Surname)

(Name)

2. Male / Female:**3. Father's name in full:**

(in Block letters. Surname a Must.)

(Surname)

(Name)

4. Mother's name in full:

(in Block letters. Surname a Must.)

(Surname)

(Name)

5. Date of Birth:

(Please attach attested copy of birth certificate from the Birth Registering Authority)

(Date)

(Month)

(Year)

6. Place of Birth:

(Place)

(District)

(State)

7. Two identification marks:**a)****b)****8. Communication address:****9. Details of School / College:****a) Name:****b) Postal address:****c) Telephone number:****d) Fax number:****8. Age as at 1st January of the calendar year of the date of this certificate**

(Years)

(Months)

9. Class in which studying as at 1st January of the calendar year of the date of this certificate (Please ensure that the date of certifying this form is filled in space provided below)

We confirm that the above information is true and correct.

Signature of the Player	Left Hand Thumb impression of player	Signature of parent
Signature of Hon. Secretary of the District Association	Signature of Hon. Secretary of the State Association	Signature of Principal / Head Master of the School / College
Seal of the Association Date: Place:	Seal of the Association Date: Place:	Seal of the School / College Date: Place: