Validity will commence W.e.f.  $\mathbf{1}^{\text{st}}$  Jan of the year of the application till  $\mathbf{31}^{\text{st}}$  -December of the  $\mathbf{3}^{\text{rd}}$  year.



## AITA COACHES REGISTRATION/ LICENSE FORM ALL INDIA TENNIS ASSOCIATION

]	Photo	grap	h

ALL INDIA TENNIS ASSOCIATION	(IN BLO	CK LETTERS)	Photograph			
AITA						
	New Registration: □					
	Registration No.:					
NAME:	Sex: Male □ Female					
	ardian's Full Name:					
Permanent	Address:		_			
		PIN:	_			
Occupation						
Tel (0):	Tel (R):	Mobile:				
Fax No:	E-Mail ID:					
Date of Reg	istration:	D.O.B:				
Educationa	l Qualification:					
Tennis Qua	lification:					
Any Other Qualification:						
Currently Working As:						
Centre in which you are coaching:						
Centre Add	ress:					
Contact No.						
REG. Amou	nt: Rs.3371 🗌	LICENSE Amount: Rs.	1686 🗌			
REG. DEMAN	D DRAFT NO:	DD Date: BA	ANK			
LICENSE DEA	AAND DRAFT NO	DD Date: B	ΔNK			
Mail to: All In	ndia Tennis Association, RK l	DD Date: Ba Khanna Tennis Stadium, Safdarjun	ng Enclave, Africa			
	Delhi –110029, Tel. No. 261'	76280 and Email- id: <u>registration@</u> able to Coaches)				
Note: Please attach (2) passport size photographs and Demand Draft of Rs. 3000 + service						
tax (12.36% Rs.	371) = 3371 (in favor of "Al	TA-ITN", Payable at New Delhi				
		(12.36%  Rs. 186) = Rs. 1686	in favor of "AITA",			
Payable at N	ew Deini	(Signaturo	Coachos)			
		(Signature				
(For Offic						
Receipt N	•	Date:				
Certification	nn•	Course Code:				