

# 37th National Masters Athletic Championship-2016

**5 to 9 Jan 2016 at Sports Complex Vidisha, Distt. Vidisha Madhya Pradesh**

## Competition Entry Form

Full Name

Last Name

Nationality  Affiliate  Yes  No

Date of Birth (dd/mm/yyyy)  Gender  Male  Female

Email Id  Phone No.

Age as on (04-01-2016)  Years  Months

Address

Paste A  
Recent  
Passport Size  
Photograph

Categories (Please tick at the right column)

Gender	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85-89	90-94	95-100	100+
Male														
Female														

### Event Choice

- 1..... (Last Performance) ..... at .....
- 2..... (Last Performance) ..... at .....
- 3..... (Last Performance) ..... at .....

### Declaration by the Competitor

I hereby declare that I am in good health and properly condition for the competition. I absolutely relieve Masters Athletic Federation of India, National Masters Athletic Championship Organizing Committee and all event sponsors from taking any responsibility for any injuries, physical loss or damage occurred to myself or to my property which may sustain in the course of (or in connection with) the National Athletic Championship.

I acknowledge that any action taken against me by the officials while performing their duties shall not give rise to any action or claims by me against the concerned official, the Organizing Committee, National Masters Athletic Championship - 2016 or Masters Athletic Federation of India.

Competitor's signature:.....

State .....

Date:

Verified By .....

(Seal with signature)