



BENGAL TAEKWONDO ASSOCIATION

71\1, CANAL CIRCULAR ROAD, KOLKATA-700054. Email- bta.tfi.boa@gmail.com



ORGANIZATION / DISTRICT / UNIT'S OFFICIAL'S INDIVIDUAL DETAILS FORM

NAME: UNIT/DIST./STATE BODY	:				Attach two Passport size Photo			
POST OF OFFICIAL IN THE BODY	:							
NAME OF THE OFFICIAL	:							
DATE OF BIRTH	:		GENDER (M/F/O)	:		BLOOD GROUP	:	
MOB. NOS	:		WHATSAPP NO	:				
ADHAR NO.	:		PAN NO.	:				
SPOUSE NAME	:							
SPOUSE CONTACT NO.	:							
RESIDENTIAL ADDRESS	:							
EMAIL ADDRESS	:							
EDU. QUALIFICATION	:		OCCUPATION	:				
OCCUPATION ADDRESS	:							
IMMEDIATE FAMILY DETAILS	:							
IN CASE OF EMERGENCY (ICE) TO CONTACT NAME	:							
IN CASE OF EMERGENCY (ICE) TO CONTACT NOS.	:							

❖ KINDLY ATTACH THE SELF ATTESTED PHOTOCOPY OF ADHAR CARD & PAN CARD WITH THE FILLED FORM

DECLARATION

I hereby declare that all the information provided by me, above is totally correct. I also hereby commit myself to only the propagation of Taekwondo, as a martial art and none other. I declare that I am not in the position of the President/Secretary/Treasurer of any other combat sport / martial art related organization.

DATE:

FULL SIGNATURE