

**PLAYER REGISTRATION / ACRIDATION FORM**

(FORM MUST BE WRITTEN IN BLOCK LETTERS )

|                   |         |                |        |                      |
|-------------------|---------|----------------|--------|----------------------|
| <b>FORM NO :-</b> |         | <b>DATE :-</b> |        | <b>PHOTOGRAPH</b>    |
| <b>NAME:</b>      | (FIRST) | (MIDDLE)       | (LAST) | <i>PASSPORT SIZE</i> |
| <b>DOB:</b>       | (Date)  | (Month)        | (Year) |                      |
| <b>MOBILE NO:</b> |         |                |        |                      |

|                 |                        |
|-----------------|------------------------|
| <b>ADDRESS:</b> |                        |
|                 |                        |
|                 |                        |
|                 | <b>CITY:</b>           |
|                 | <b>PINCODE:</b> STATE: |

|               |  |
|---------------|--|
| <b>EMAIL:</b> |  |
|---------------|--|

**MEMBER OF A CLUB OR A GYMKHANA OR AN INSTITUTION (TICK)**

|              |  |
|--------------|--|
| <b>NAME:</b> |  |
|--------------|--|

I HAVE READ THE STIPULATED GUIDELINES OF BSAM'S PLAYER REGISTRATION ONLINE  
 I UNDERSTAND THAT THESE GUIDELINES ARE BASED ON THE MINUTES DATED FEB 26TH, 2018  
 I AGREE TO THE GUIDELINES & ANNUAL FEE AS MINUTED  
 I AM AWARE THAT THIS REGISRATION IS VALID FOR ONE FINANCIAL YEAR (1ST APRIL TO 31ST MARCH)  
 I CONCUR WITH THE BENEFITS & IMPLICATIONS AS MENTIONED IN THE GUIDELINES  
 I HEREBY CONSENT TO BE REGISTERED AS A PLAYER

|                                                                            |        |
|----------------------------------------------------------------------------|--------|
| <b>SIGNATURE</b> _____                                                     | (DATE) |
| cheque drawn in favor of "BILLIARDS & SNOOKER ASSOCIATION OF MAHARSHTRA ," |        |

**Payment Details**

|                  |                  |
|------------------|------------------|
| <b>Bank Name</b> | <b>Cheque No</b> |
| <b>Amount</b>    | <b>Date</b>      |

(THE DETAILS PROVIDED ON THIS FORM WILL BE USED & STORED BY BSAM)  
 (ONLY YOUR NAME WILL REFLECT IN THE PLAYERS LIST ON THE BSAM WEBSITE FOR EASY REFERRAL)