Andhra Pradesh Table Tennis Association

(Regd. No.166/1964)

Affiliated to Table Tennis Federation of India, Sports Authority of APTTA & Andhra Pradesh Olympic Association

Player's Eligibility Certificate

(PLEASE FILL IN CAPITAL LETTERS)

Photo of the player

Year	2	0	2	3
State				

Given Name	
Surname	
Father's Name	
Mother's Name	

Date of Birth (in figures) *	Day			Month		Year	
In Words							

Place of Birth	
State	

Class(studying at present)		Admission No		Sex	

Home Address	
	E-Mail ID

Telephone No	Residence	

Contact No (mobile)		Blood Group	

Name & Address of School/Institution	

We hereby certify that the information given above are correct as per School/College Record

Signature of Player	Signature of Father/Guardian	Signature of Headmaster/Principal

Date:	Principal/HM's Name	

Seal of Institution

Signature of Secretary

_____State TT Assn

Details of Passport	
Passport Number	
Date of Issue	
Valid upto	
Place of Issue	

* Please attach Original Date of Birth certificate issued by Corporation/Municipality/Panchayat along with this form

Also attach copy of the Passport and Aadhar Copy

1 Passport Size Photo and 1 Stamp Size Photo

For Office Use

Date of Registration

TTA Reg. No

ID Issued Y N

Dispatched on