

বন্ধুশাশ্বনেস্টেন্স্টিশ্মাঞ্ছ্ৰা Bhutan Archery Federation

Compound Bow Coaching Camp & Competition REGISTRATION FORM

Official Use only				
Serial No:				
Date:				
Venue:				

		_		Venue:		
		Name:				
	Passport size photo					
		Present Address	(mailing address/care of/	place of residence):		
Co	ontact Details (mar	ndatory to fill in):				
	1obile # Fixed Phone#:					
		Fixed Phone#: In y if employee; school if student; etc.): Sht (cm) Weight (kg): BMI (Official use): O play the international style of compound archery?				
Organisation (company if employee; school if student; etc.):						
Physical Details: Height (cm)						
	Are you interested to play the international style of compound archery?					
PΙέ	ease tick the answe					
	_					
٩r	e any of your ance		eir skill in archery?			
Ha	lave you participated in archery coaching camps conducted by BAF before?					
	1. No:	2. Yes: 🗌	If 'yes', when?			
		Please attach pro	of of age (citizenship ID Car	·d)		