**PLAYERS REGISTRATION FORM**

**47th PESTA HOKI USM-PENANG INTERNATIONAL 2024**

|  |  |
| --- | --- |
| TEAM MANAGER NAME:  | NAME OF TEAMS: |
| CONTACT NUMBER: | ORIGIN OF STATE/COUNTRY: |
| EMAIL: | JERSEY COLOUR :1.  |
| CATEGORY: |  2. |

***1.If you want to register more than one team or multiple categories, please copy entire page and fill up in the next page.***

***2.Please email copy of identification card/passport of players (front page only) with the form. This only apply for aged group and veteran categories.***

***3.All players must use the same registered number throughout the competition.***

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **NO** | **NAME IN BLOCK LETTERS** | **I.C. / PASSPORT NUMBER** | **DATE OF BIRTH****(JUNIOR &VETERAN)** | **REGISTERED JERSEY NUMBER** | **BIPS NUMBER** | **FIELDED PLAYERS****( TICK ✓)** | **RESERVE PLAYERS****( TICK ✓ )** |
| 1 | \*(C) |  | / / |  |  |  |  |
| 2 | \*(GK) |  | / / |  |  |  |  |
| 3 |  |  | / / |  |  |  |  |
| 4 |  |  | / / |  |  |  |  |
| 5 |  |  | / / |  |  |  |  |
| 6 |  |  | / / |  |  |  |  |
| 7 |  |  | / / |  |  |  |  |
| 8 |  |  | / / |  |  |  |  |
| 9 |  |  | / / |  |  |  |  |

*\* C for Captain \* GK for Goal keeper*

*4. With this, we agree to fully abide by the rules and regulations of the 47TH Pesta Hoki USM-Penang International 2024 and all other conditions / by laws as may be enforced by the Technical Committee.* I confirm the above statement is true.

SIGNATURE:

**ORGANIZER’S ENDORSEMENT STAMP**

**TEAM’S AFFILIATION STAMP**