



# GILLI DANDA INTERNATIONAL FEDERATION

## Membership Form

COUNTRY/UNIT \_\_\_\_\_

PRESIDENT/SECRETARY NAME \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ AGE \_\_\_\_\_ SEX \_\_\_\_\_

YEARS OF STUDY \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE/COUNTRY \_\_\_\_\_

TELEPHONE \_\_\_\_\_ MOBILE \_\_\_\_\_

E-MAIL \_\_\_\_\_ WEBSITE \_\_\_\_\_

EDUCATION RECEIVED \_\_\_\_\_

SPORTS ACHIEVEMENTS \_\_\_\_\_

RECOMMENDED BY \_\_\_\_\_

AFFILIATION/MEMBERSHIP TYPE \_\_\_\_\_

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND ACCURATE, FURTHER, I DO HEREBY, FOR MYSELF, MY HEIRS, EXECUTORS AND ADMINISTRATORS, WAIVE RELEASE AND FOREVER DISCHARGE ANY AND ALL RIGHTS AND CLAIMS FOR DAMAGES WHICH I MAY HAVE OR WHICH MAY HEREAFTER ACCRUE TO ME AGAINST THE GILLI DANDA INTERNATIONAL FEDERATION OR THEIR RESPECTIVE OFFICERS, AGENTS, REPRESENTATIVES, SUCCESSORS AND/OR ASSIGNS, FOR ANY AND ALL DAMAGES WHICH MAY BE SUSTAINED AND SUFFERED BY ME IN CONNECTION WITH MY FEDERATION WITH OR ENTRY IN THE SPORTS ACTIVITIES ASSOCIATED WITH GDIF. IN ADDITION, BY MY SIGNATURE, I CERTIFY I UNDERSTAND THAT SUBMISSION OF A COMPLETED APPLICATION AND THE APPROPRIATE.

SIGNATURE \_\_\_\_\_ FULL NAME \_\_\_\_\_

DATE \_\_\_\_\_ PLACE \_\_\_\_\_

### FOR OFFICE USE ONLY:-

AFFILIATION/MEMBERSHIP NO \_\_\_\_\_

AUTHORIZED SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Photo of  
Applicant

**Approved by The Association for National Sports Federations**

Member of The Association for International Sports For All- Tafisa Recognized by International Olympic Committee

E-mail: [gillidandafederation@gmail.com](mailto:gillidandafederation@gmail.com) Visit: <http://www.gillidandasport.com>