

INTERNATIONAL CLUB

BHEL, HARIDWAR-249403

www.icshwr.co.in

ENROLMENT FORM - ROLLER SKATING COACHING CAMP-2023

NAME OF CANDIDATE				
SEX: MALE/FEMALE		_ DOB	AGE	YEARS
S/O, D/O SH/SMT				
WARD (CLUB MEMBER / BHE	EL EMPLOYEE / OT	HER)		
MEMBERSHIP NO. (FOR CLU	B MEMBER)			
STAFF NO.(FOR BHEL EMPL	OYEES)			
Reference of BHEL Employee	e (in case of NON-B	HEL) :		
NAME :	Staff no		Signature	
SCHOOL NAME:				
CLASS :				
RESIDENTIAL ADDRESS				
PHONE NO: LANDLINE E-MAIL ADDRESS:				
CONTROL NO : 2023 / (TO BE FILLED BY CLUB))			
			(SIGNATURE OF I	PARENTS)
RECEIVED RS_ TOWARDS ROLLER SKA		G CAMP 20		ONLY)
NAME OF CANDIDATE_				
S/O, D/O SH/SMT				

CONTROL NO: 2023 / (FOR INTERNATIONAL CLUB)