

UNIVERSITY OF MUMBAI INTER COLLEGIATE
CHESS TOURNAMENT 20 - 20



ENTRY FORM

(To be submitted on or before the last date mentioned in the Sports Calendar.)

Name of the College & Code No.:

Tel. No.: _____

Fax No.: _____

E-mail: _____

The Director of Phy. Edun. & Sports,
University of Mumbai,
University Sports Pavilion,
Marine Lines, Mumbai-400 020.

Sir,

I am please to inform you that my college will participating in the above stated Tournament/s to be held during the current academic year. Our College has paid Annual Sports Contribution vide Cheque/DD.No. _____ dated _____ and Entry Fees vide Cheque/DD.No. _____ dated _____ to the University. If Sports Contribution/Entry Fee not paid the entry may be rejected. The names of the participants are as under.

(Name of Players in order with **FIDE RATING** if any)

MEN TEAM

WOMEN TEAM

Name of the Players	FIDE RATING	Name of the Players	FIDE RATING
1. _____	_____	1. _____	_____
2. _____	_____	2. _____	_____
3. _____	_____	3. _____	_____
4. _____	_____	4. _____	_____
5. _____	_____	5. _____	_____
6. _____	_____	6. _____	_____

The detail eligibility information of the participants/s is given on the back side.

Place: _____

PRINCIPAL

Date: _____

(College Seal)

Note: PLEASE } Name _____ & Phone No. _____ of any other
STATE } responsible person from your College to contact him/her in case of emergency/
HERE } urgency arises beyond normal working hours or on holidays.

P.T.O.