## UNIVERSITY OF MUMBAI INTER COLLEGIATE **TUG-OF-WAR** TOURNAMENT 20 - 20



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

	Name of the College & Code No.:
	Tel. No.:
	rax No.:
TI D' CN DI OC	E-mail:
The Director of Phy. Edun. & Sports, University of Mumbai, University Sports Pavilion, Marine Lines, Mumbai-400 020.	
Sir,	
Tournament/s to be held during the curren Contribution <u>vide</u> Cheque/DD.No dated	my college will participating in the above state academic year. Our College has paid Annual Sport dated and Entry Fees vid to the University. If Sport may be rejected. The names of the participants are a
MEN	WOMEN
1	
2	2
3	3
4	4
5	
6	6
7	7
8	
9	
Place:	the participants/s is given on the back side.  PRINCIPAL
Date:	
	(College Seal)
Note: PLEASE Name	& Phone No of any other your College to contact him/her in case of emergency
STATE responsible person from HERE urgency arises beyond nor	your College to contact him/her in case of emergency mal working hours or on holidays.