

UNIVERSITY OF MUMBAI INTER COLLEGIATE **WRESTLING FREE STYLE (WOMEN)** COMPETITION, 20__ -20__

(To be submitted on or before the last date mentioned in the sports calendar)

THE ENTRIES SHOULD BE TYPE-WRITTEN

NAME OF THE COLLEGE _____

Mark 'X' against competitor's and 'R' against Reserve in the Group column in which he is taking part.

	Name of the Competitor (Type the name in full beginning with SURNAME)	Upto 50 Kgs	Upto 53 Kgs	Upto 55 Kgs	Upto 59 Kgs	Upto 62 Kgs	Upto 65 Kgs	Upto 68 Kgs	Upto 72 Kgs	Upto 76 Kgs
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2										
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16										

Our college has paid Annual Sports Contribution vide Cheque /DD.No. _____ dt _____ & Entry Fee Vide Cheque/DD No. _____ Dt. _____ to the University. If Sports Contribution/Entry Fee not paid the entry may be rejected.

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

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

Principal

(College Seal)