24th National Athletics Championship

01 – 03 October 2015

Special Need Final Entry Form

Personal Details

Name:. Mr./Ms

Date of Birth: ID / PP. No:

Permanent Address:

Mobile No: Res. Phone No: Office Phone No:

Entry

Wheel Chair 100m

Blind 200m

Deaf 800m

 Autism/

 Down syndrome

 Long Jump

Submit (email or fax) this form with copy of ID card or Passport on or before 24 September 2015, 1600hrs



for more information

call: 9762449,7675308

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