

**TAMIL NADU STATE OPEN SELECTION TRIALS FOR  
2<sup>nd</sup> ASMITA TAEKWONDO LEAGUE (KHELO INDIA) – 2024 - 25**



**(Cadet, Junior & Senior)**

02<sup>nd</sup> September 2024

Indra Ganesan College of Engineering, IG valley  
(near new Integrated Bus Terminal), Manikandam, Tiruchirappalli District - 62001



**ORGANISED BY : TRICHY SPORTS TAEKWONDO ASSOCIATION**

**PROMOTED BY : TAMIL NADU TAEKWONDO ASSOCIATION**

Regd Office: No 9, Dr. Ranga Road, Mylapore, Chennai – 600 004

Contact Address : 646/4, Govindasamy Street, Vanniyar Nagar, Periyapudur, Salem - 636016

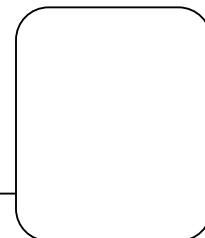
**INDIVIDUAL ENTRY FORM**

GIRL

CADET

JUNIOR

SENIOR



Weight Category : \_\_\_\_\_ Weight \_\_\_\_\_

**NAME (in capital letter)** : \_\_\_\_\_

Date of Birth : \_\_\_\_\_ AGE \_\_\_\_\_

Parent / guardian name : \_\_\_\_\_

Name of the Coach : \_\_\_\_\_

**Name of the District** : \_\_\_\_\_

Address : \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Present belt grade : \_\_\_\_\_ T.F.I.I.C. No. \_\_\_\_\_

Copy of corporation / municipal / school date of birth certified should be enclosed compulsory. (Original date of birth should be produced at the time of weigh – in)

**DECLARATION**

I, the undersigned do hereby solemnly affirm, declared and confirm for myself, my heirs, executors & administrators that I indemnify the promoters / organiser / sponsors & its members, officials, participants etc., holding myself personally responsible for all damages, injuries of accidents, claims, demands etc., waiving all prerogative rights, whatsoever related to the above set forth event.

\_\_\_\_\_  
Signature of the Parent / Guardian

\_\_\_\_\_  
Signature of the Participant

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**INDIVIDUAL ENTRY FORM**

**POOMSAE**

UNDER 14 Years     UNDER 17 Years     UNDER 30 Years

Gender :  FEMALE

Name of The District : \_\_\_\_\_

NAME (in capital letter) : \_\_\_\_\_

Date of Birth : \_\_\_\_\_ AGE \_\_\_\_\_

Parent / guardian name : \_\_\_\_\_

Name of the Coach : \_\_\_\_\_

Address with Mobile No : \_\_\_\_\_

Present belt grade : \_\_\_\_\_ T.F.I.I.C. No. \_\_\_\_\_

Copy of corporation / municipal / school date of birth certified should be enclosed compulsory.

**DECLARATION**

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