



ALL NEPAL FOOTBALL ASSOCIATION

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ANFA INTER COLLEGE FUTSAL CHAMPIONSHIP 2024

TEAM ENTRY CONFIRMATION FORM

NAME OF THE TEAM/COLLEGE:.....

ADDRESS:

REGISTRATION NO:..... REGD. YEAR:..... PAN NO.:.....

BANK A/C NO.:

BANK NAME:.....

EMAIL:..... PHONE NO:.....

PRINCIPAL'S/CHIEF'S NAME:.....

MOBILE NO.:..... EMAIL:.....

TEAM MANAGER'S NAME:.....

MOBILE NO.:..... EMAIL:.....

DECLARATION: WE HEREBY DECLARE THAT THE ABOVE MENTIONED INFORMATION IS CORRECT AS PER OUR KNOWLEDGE AND THE DOCUMENTS SUBMITTED ARE VALID. WE CONFIRM FOR THE PARTICIPATION OF THE TEAM AND DECLARE TO ABIDE BY THE ANFA STATUTES AND COMPETITION REGULATIONS ISSUED BY THE ANFA.

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TEAM MANAGER'S SIGNATURE

TEAM'S STAMP

.....

PRINCIPAL'S/CHIEF'S SIGNATURE

DATE:.....

(Email this form to anfacompetitiondept@gmail.com)