



ASSOCIATION OF CRICKET UMPIRES KARNATAKA

PHOTO

FOUNDED 1974

No.26/31, 01st Main Road, 01st floor, Maruthi Extension, Bangalore 560021

APPLICATION FORM FOR MEMBERSHIP

FULL NAME			
FATHER'S NAME			
EMAIL ID			
DATE OF BIRTH			
BLOOD GROUP			
ADDRESS	RESIDENTIAL		
	OFFICIAL		
MOBILE NUMBER		MOBILE NUMBER / LAND LINE	OFFICE NUMBER
IF QUALIFIED YEAR OF PASSING		EXPERIENCE AS PLAYER /UMPIRE	ANY OTHER RELATED ACTIVITY

I hereby declare that I shall abide by the Byelaws of the Association and will not act in a manner that brings the Association in to disrepute. I request you to please enrol me as

	Life Member		Life Associate		Member		Associate Member
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Mode of Payment	Cheque	DD	UPI	Cash
No / Ref No / Whom				
Amount				

Place:

Zone:

Date:

Signature

OFFICE USE

	Approved		Not Approved
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at the WC meeting held on

Hon.secretary/ Jt. Secretary