

HOCKEY INDIA

OFFICIALS DATA FORM



SECTION 1 – TO BE COMPLETED BY ALL OFFICIALS

A) PERSONAL DETAILS

Name of Official: _____
(Surname)

(First Name)

Father/Husband Name: _____

Mothers Name: _____

Address: _____

Contact Number: _____

Email Address: _____

Place of Birth: _____

Date of Birth: _____

Department Details: _____

(Number, Fax, Address) _____

Registered with State Unit _____

(Registration No.) _____

Emergency Contact: _____

(Name, Number, Address) _____

Shirt Size: _____

Short / Skirt Size: _____

Shoe Size: _____

B) MEDICAL

Height: _____

Weight: _____

Blood Group: _____

Known Allergies: _____

Identification Marks:

- a) _____
- b) _____

C) HOCKEY OFFICIATING CAREER

Officiating Position applied for: _____

Date / Year started officiating at State Level: _____

State Member Unit registered with
(National / International / FIH): _____

Year achieved status: _____

FIH ID number: _____

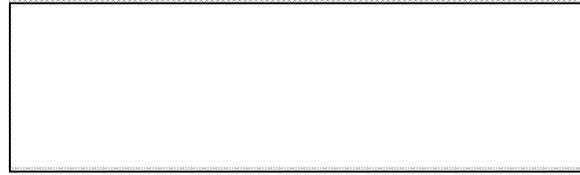
Year finish international career: _____
(if relevant)

Career Details:

S. No.	Name of the Tournament	Venue	Dates
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Place: _____

Date: _____



Signature of the Official
(Please sign with blue or black ink)

PLEASE SUPPLY 2 PASSPORT SIZES PHOTOGRAPHS AND 1 FULL LENGTH PHOTOGRAPH (i.e Head to Feet)

PLEASE SUPPLY THE BELOW MENTIONED IDENTITY DOCUMENTS: -

- 1. COPY OF PASSPORT (FRONT AND BACK PAGES)**
- 2. COPY OF AADHAR CARD**
- 3. COPY OF MATRICULATION CERTIFICATE (10TH GRADE)**

MEMBER UNIT USE ONLY

MEMBER UNIT NAME _____

NAME _____

DESIGNATION _____

SIGNATURE & SEAL: _____
(PRESIDENT/ GENERAL SECRETARY)

HOCKEY INDIA USE ONLY

FILE VERIFIED: YES/ NO: _____

HI OFFICIAL REGISTRATION NUMBER: _____

DATE: _____

HOCKEY INDIA OFFICIAL: _____