



**NAVY MUMBAI SPORTS ASSOCIATION**  
Sector 1 A, Vashi Navi Mumbai

**Physical Fitness Coaching**

FOR THE MONTH: \_\_\_\_\_

Schedule :- Tuesday to Saturday

Evening 5.30 p.m. to 8.00 p.m.

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1. NAME : \_\_\_\_\_
2. MEMBERSHIP NO : \_\_\_\_\_ Mob.No : \_\_\_\_\_
3. ADDRESS : \_\_\_\_\_  
\_\_\_\_\_
4. DATE OF BIRTH : \_\_\_\_\_

Weight :- \_\_\_\_\_ K.G. Height :- \_\_\_\_\_ C.M. Age:- \_\_\_\_\_  
I hereby declare that I am joining / have permitted my son / daughter to join the Physical Fitness Coaching Class at my own will and risk. I Indemnify the Association for any Minor / major / fatal accident during the period of training.

SIGN OF APPLICANT

SIGN OF COACH.

SIGN OF SPORTS SUPERVISOR

SIGN OF EXEC.SECRETARY

**FOR OFFICE USE ONLY.**

AMOUNT: \_\_\_\_\_ **FEES:**  
Member: Rs. 2200/-  
RECEIPT NO: \_\_\_\_\_ Non. Members: Rs. 2500/-  
RECEIVED BY: \_\_\_\_\_