

21ST BRO. O'BRIEN MEMORIAL INTER SCHOOL

TENNIS TOURNAMENT 2009
[From 5th December – 11th December, 2009]

ENTRY FORM

To,
The Organizing Secretary,
21st Bro. O'Brien Memorial Tennis Tournament,
Mount St. Mary's School,
75, Parade Road, Delhi Cantt. – 110 010

Dear Sir,
Please enter our school team in the above tournament.
[Please mark event for which you wish to enter.]

TEAM EVENTS

JUNIOR BOYS Rs. 600/-
SENIOR BOYS Rs. 600/-

INDIVIDUAL EVENTS

JUNIOR BOYS Rs. 300/-
SENIOR BOYS Rs. 300/-

DOUBLES EVENTS

JUNIOR BOYS Rs. 500/-
SENIOR BOYS Rs. 500/-

I am sending herewith Rs. on account of entry fee. (All cheques or drafts should be in the name of Principal, Mount St. Mary's School)

School :
Tel. No. :

Date :

Signature

[Head of Sports Dept.]

Signature & Seal of the Principal

MOUNT ST. MARY'S SCHOOL
21ST Bro. O'Brien Memorial Inter- School Tennis Tournament

Name of the School _____

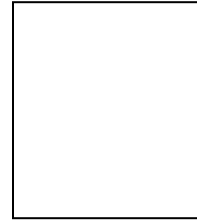
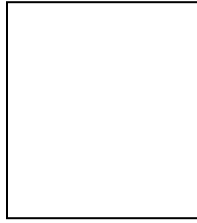
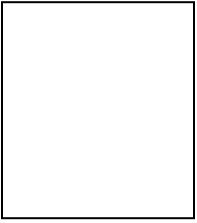
Address _____

Phone Nos. _____

Fax No. _____ Email _____

ENTRY FORM
(to be submitted on or before 26th November 2009)

SENIOR SCHOOL TEAM



Name & Sign _____

Name & Sign _____

Name & Sign _____

Class & Sec. _____

Class & Sec. _____

Class & Sec. _____

Date of Birth _____

Date of Birth _____

Date of Birth _____

Admission No. _____

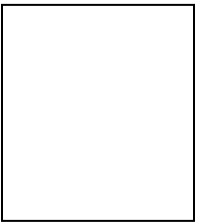
Admission No. _____

Admission No. _____

Date of Admission _____

Date of Admission _____

Date of Admission _____



Name & Sign _____

Class & Sec. _____

Date of Birth _____

Admission No. _____

Date of Admission _____

Name of the Coach _____ Phone No. _____

I have read the rules and regulations mentioned and on behalf of the school agree to abide by them and further state that students would be responsible for any injury sustained during the tournament and that no claims for compensation will be made by them.

School Seal

Signature of the Principal

Date _____

MOUNT ST. MARY'S SCHOOL
21ST Bro. O'Brien Memorial Inter- School Tennis Tournament

Name of the School _____

Address _____

Phone Nos. _____

Fax No. _____ Email _____

ENTRY FORM
(to be submitted on or before 26th November 2009)

JUNIOR SCHOOL TEAM

Name & Sign _____

Name & Sign _____

Name & Sign _____

Class & Sec. _____

Class & Sec. _____

Class & Sec. _____

Date of Birth _____

Date of Birth _____

Date of Birth _____

Admission No. _____

Admission No. _____

Admission No. _____

Date of Admission _____

Date of Admission _____

Date of Admission _____

Name & Sign _____

Class & Sec. _____

Date of Birth _____

Admission No. _____

Date of Admission _____

Name of the Coach _____ Phone No. _____

I have read the rules and regulations mentioned and on behalf of the school agree to abide by them and further state that students would be responsible for any injury sustained during the tournament and that no claims for compensation will be made by them.

School Seal

Signature of the Principal

Date _____