



07524-274100

acy@bsf.nic.in

**REGISTRATION FORM FOR BSF HALF MARATHON 2017 IN THE MEMORY OF MARTYRS  
ON 22 OCT 2017 AT BSF ACADEMY, TEKANPUR.**

01. Gender  Male  Female
02. First Name..... Last Name.....
03. Nationality.....
04. Date of Birth  Age .....Years as on date.
05. Email Address
06. Mobile Number
7. Address.....  
..... Pin Code.....  
City..... State.....Country.....
08. Photo Identity Proof \_\_\_\_\_(Enclose a photocopy) Blood Group \_\_\_\_\_  
(PAN/Aadhar Card/Driving License/Voter Card etc.... )
9. Emergency Contact Name \_\_\_\_\_ Mobile Number \_\_\_\_\_  
(Emergency contact Person should not be a participant in this event)
10. Do you have Timing Certificate of any previous Event? If yes provide Photo Copy. Yes/No
11. Race Category  21 KMS (Rs.100)  5 KMS(Rs.100)

**LAST DATE FOR FORM SUBMISSION:  
- 21 OCT 2017 1700 HRS**

Signature of Applicant  
Please read T& C & Sign on back

Note: Form duly filled along with registration fee and photo copies of required documents to be submitted at BSF Registration Counter, BSF Academy, Tekanpur.

----- CUT HERE -----

Acknowledgment Slip

Form No:

Received Amount Rs.100 for participating BSF ACY. HALF MARATHON 2017 on 22 OCT 2017  
from Shri/Smt.....

Date:  
Place:

Signature

