

دورة ند الشبا الرياضية 2019
NAS SPORTS TOURNAMENT 2019
بطولة ند الشبا للكرة الطائرة
NAS VOLLEYBALL CHAMPIONSHIP



Date:/...../ 2019

PLAYER AGREEMENT FORM

I am, the player undersigned:

..... (as per the passport) , Nationality ,
Passport / ID number ,Passport/ID , expiry date:/...../

Confirm my agreement to participate in NASST volleyball championship 2019 with the team mentioned below:

.....as follows:

- 1 - During qualifying for the finals • 2 - During the finals (Ramadan) •
3 - Qualifiers and finals.

By signing this agreement, I pledge to respect the rules & regulations of the Championship, the spirit of sport and the principles of fair competition.

PLAYER NAME:

PLAYER SIGNATURE:

It is requested to fill the form and upload it to register the player in the team during the assigned registration period.