

SECRETARIAT OF IHAVANDHOO COUNCIL

HA. IHAVANDHOO

REPUBLIC OF MALDIVES



ދިވެހިސަރުކާރުގެ ގެޒެޓް ގައި ބަޔާންކުރި ގޮތުގައި
ސަރުކާރުގެ ފަރާތުން
ދިވެހިރާއްޖޭގެ ސަރުކާރުގެ ފަރާތުން

2026 ވަނަ އަހަރުގެ ފުޅާ ބަޔާންކުރި ގޮތުގައި
PLAYER REGISTRATION FORM

TEAM INFORMATION

TEAM NAME		Signature:
MANAGER		
ID NUMBER		
CONTACT NUMBER		

PLAYERS

#	PLAYER NAME (IN BLOCK LETTERS)	J.NO	ID NUMBER	DOB (dd.mm.yyy y)	Captain / Libero	PLAYER CAT		
						ISLAND	NON ISLAND	UNDER 19
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								

OFFICIALS

OFFICIALS	NAME (IN BLOCK LETTERS)	ID NUMBER	PHONE NUMBER
MANAGER			
COACH			
TRAINER			
OFFICIAL			
MEDICAL			