



CYCLING FEDERATION OF INDIA

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CFI/Talent Identification/2024-25/1

July 17th, 2024

To,
Sh. Jaspreet Singh, IAS,
Deputy Commissioner
Bathinda, Punjab

Sub: Conduct of Talent Identification program at grassroot level, regarding

Dear Sir,

Greetings from Cycling Federation of India!

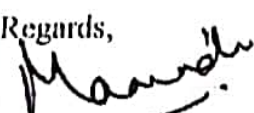
This is to inform you that Cycling Federation of India is conducting Talent Identification program for grass root athletes of age group of 12 to 14 years (boys & girls) at Saheed Bhagat Singh Stadium, Bathinda, Punjab on 28th July 2024.

Ms. Sukhpal Kaur (Mob. No. 8289050005) is the in-charge for the said program. However, Mr. Jagdeep Singh Kahlon (Mob. No. 7901964555) is the Nodal Officer for Punjab state, appointed by Cycling Federation of India.

In view of the above, it is requested to kindly extend necessary support towards the security and an Ambulance during the program. Detailed program shall be shared shortly.

CFI is also looking for all the support from your side for the maximum participation of the youth and successful culmination of the trails.


Regards,


Maninder Pal Singh,
Secretary General



Copy to: Mr. Jagdeep Singh Kahlon, Nodal Officer, Punjab for Talent Identification program

Affiliated to IOA, Asian Cycling Confederation & UCI, Recognized by: Ministry of Youth Affairs & Sports, Govt. of India
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ਸਿੱਕੂ ਸਪੋਰਟਸ ਕੋਆਰਡੀਨੇਟਰ
ਬਠਿੰਡਾ। 456

ਦਰਤਰ ਜਿਲ੍ਹਾ ਸਿੱਖਿਆ ਅਫ਼ਸਰ (ਜੈ.ਜਿ.) ਬਠਿੰਡਾ

ਪੱਤਰ ਨੰ. - ਜਿਲ੍ਹਾ ਸੇਵਾ ਕਮਿਸ਼ਨਰੀ ਬਠਿੰਡਾ/2024/130 ਮਿਤੀ: - 26⁶⁷/₂₀₂₄

ਉਪਰੋਕਤ ਦੇ ਉਤਾਰਾ ਸਮੂਹ ਸਕੂਲ ਸੁੱਖੀਆਂ ਅਤੇ ਜੋਤਸੁ ਖੁਦਾਈ ਸ਼੍ਰੀ
ਸਿੱਖਿਆ ਜਾਗੀਰੀ ਨੂੰ ਹਿ ਕੋਈ ਪੱਤਰ ਦੀ ਪ੍ਰੀਤ ਥਿਤ ਪਾਠਕਣ ਵਰੇ ਹੋ
ਸਾਇਰਡਿੰਗ ਫਿੰਡਿੰਗ ਟੈਪਰ ਤੁਸੀਂ ਮੁਪਦੇ ਸਕੂਲ ਅਤੇ ਜੋਤਾ ਦੇ
ਖਿਤਾਬੀਆਂ ਸ਼੍ਰੀ ਮਿਤੀ 28-07-2024 ਸ਼੍ਰੀ ਸਵੇਰ 5.30 ਤੋਂ 9.00 ਏਜ ਤੋਂ
ਸਗੈਰ ਤੋਰਤ ਸਿੱਖ ਸੇਵਾ ਕਮਿਸ਼ਨ ਬਠਿੰਡਾ ਵਿਖੇ ਸਗੈਰ ਸਿੱਖਿਆ
ਅਫ਼ਸਰ ਤਾਡ ਭੇਜਣਾ ਜਰੀਤੀ ਚੜ੍ਹਾਇਆ ਜਾਵੇ।

ਦਸਿੰਦੁ
ਜਿਲ੍ਹਾ ਸਪੋਰਟਸ ਕੋਆਰਡੀਨੇਟਰ
ਬਠਿੰਡਾ



Talent Identification program 2024

Registration form

1. Full Name : _____
[In Block Letters].
2. Father's Name: _____
[In Block Letters]
3. Complete Address : _____
of Correspondence _____
_____ Pin Code: _____
Phone: (R) _____ (O) _____
Mobile/Email: _____
4. Date of Birth : _____ 4. Occupation : _____
5. Blood group : _____
6. Emergency contact No.: _____
7. Height _____ Wieght _____ Educational qualification _____
8. Sports Background: School/ Dist/ State/ National Level
9. Remarks (if any) : _____

10. In consideration of the acceptance of my application for entry in the above talent identification program as participants, I hereby wave, release and discharge any and all claims for damages, for death, personal injury or property damage which I may have or which may hereafter accrue to me, as a result of my participation in the said event organized by respective State Cycling Association. This release is intended to discharge in advance the Organizer, the Promoters, the Sponsors, the Cycling Federation of India, the Promoting Clubs, the Officials and any involved municipalities or other public entities [and their respective agents and employees], from and against any and all liabilities arising out of action on the part of the persons or entities mentioned above.

I, further understand that serious accidents occasionally occur during the event and that participants occasionally sustain mortal of serious personal injuries and/or property damages as a consequence thereof. Knowing the risk, I hereby agree, to assure these risks and to release and hold harmless all the persons or entities mentioned above who might otherwise be liable to me [or my heirs or assigns] or damages. It is further understood and agreed that waiver, release and assumption of risks is to be binding on my heirs and assigns.

Documents to be attached (Mandatory)

- DOB proof: Birth certificate/ Passport
- Address proof: Adhar Card/ Passport

I understand Rules and Regulations of above-mentioned event which are binding on me.

[Signature of the parents]

Sign of the officials _____

Name of the officials _____

Date _____ Place _____