



Afghan Sports Federation presents...  
**Bowling Tournament**

# REGISTRATION FORM

Date \_\_\_\_\_

PAID

Team Name: \_\_\_\_\_

Team Captain: \_\_\_\_\_

Player Name	Email	Telephone
1.		
2.		
3.		
4.		
5.		

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**Please fax your registration form to 703.440.4002**

**Please Read and Sign Below (required).**

**Disclaimer:** Afghan Sports Federation and it's members are not liable for any incidents, injuries, assaults, and other altercation during the tournament in or around the facility. Each player is responsible for his/her actions. Complete rules and regulations are posted online: [www.afghansportsfederation.org](http://www.afghansportsfederation.org)

I fully understand the rules and regulations above and will abide by the ASF rules.

Signature of Team Representative: \_\_\_\_\_ Date: \_\_\_\_\_

**Note:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_