

# Inter Faculty Road Race Championship (Men) - 2024

## Entry Form

Faculty

Date

05<sup>th</sup> May  
2024

No	Name with Initials	Registration No.	Contact Number	Signature
1.				
2.				
3.				
4.				
5.				

Name of the team captain: -.....

.....  
Signature

Contact No. : -.....

I hereby certify the above mentioned students are internal students of the above mentioned Faculty/ Institute.

.....  
Instructor /PE (Faculty Representative)

.....  
Signature of Dean / Director / AR

Stamp

### **Note :**

- \* **Distance of the race - 10 km**
- \* **Maximum 05 athletes should be participated each Faculty.**
- \* **Please submit the valid medical report within 6 months issued by the University medical officer or an accredited medical officer.**
- \* **08 numbers of safety pins should be brought by all the athletes.**
- \* **Race will be start at 6.00 am**
- \* **Entry forms should be submitted to the department on 30<sup>th</sup> of April 2024**

Contact: - Ms. Nayanthi Chandrasena (Instructor in Physical Education) - 0768475235