

Inter Faculty Freshers' Road Race Championship (Men) - 2024

Entry Form

Faculty

Date

09th Feb 2025

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 1st year 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

Contact: - Ms. Nayanthi Chandrasena (Instructor in Physical Education) - 071 2697564