PTCL™
PRO TENNIS CRICKET LEAGUE

TEAM REGISTRATION FORM

PRO TENNIS CRICKET LEAGUE

SEASON 1

A. TEAM DETAILS

Team Name : _____

Team Logo : ☐ Attached _____

City / Village : _____

District : _____

State : _____

B. OWNER DETAILS

Owner Name : _____

Father's Name : _____

Mobile No. : _____

Email ID : _____

Address : _____

_____

Aadhaar No. (Last 4 Digits) : _____

ID Proof Submitted:
(Minimum 2 Required)

☐ Aadhaar Card ☐ PAN Card
☐ Driving Licence
☐ Passport
☐ Voter ID Card
☐ Other _____

Signature : _____

Date : _____

C. TEAM INFORMATION

Captain Name : _____

Vice-Captain Name : _____

Coach Name (If Any) : _____

Total Registered Players : _____ (Minimum 11 – Maximum 15)

Emergency Contact Person : _____

Emergency Contact Number : _____

D. IMPORTANT NOTES

- Carry 2-3 original Government-issued Photo ID proofs on every match day.
- All registered players must belong to the same district represented by the team.
- Upload a recent waist-up photo in the official team jersey on the scoring app before the match day.
- The Team Owner/Manager is responsible for the accuracy of all player details and submitted documents.
- Submission of this form confirms acceptance of the latest PTCL Handbook, Tournament Rules & Conditions.
- The Tournament Committee reserves the right to verify player eligibility and documents at any stage of the tournament.

All communications & payments will be strictly with official contact number, No other contact no.

E. DECLARATION

I the undersigned, hereby declare that all information submitted in this registration form is true and correct. I have read and understood the PTCL Official Handbook, Tournament Rules and all terms & conditions. I accept full responsibility for the conduct, discipline and behaviour of our players, team officials and supporters. I agree to abide by all the rules and regulations of PTCL and decisions of the league Committee will be final and binding on all matters related to the league.

OWNER SIGNATURE

Name : _____

Signature : _____

Date : _____

F. FOR OFFICIAL USE ONLY

Registration No. : _____

Fee Received : ₹ _____

Documents Verified: ☐ Yes ☐ No

Approved By : _____

Designation : _____

Signature : _____

Date : _____