



TEAM REGISTRATION FORM

CLOSING DATE
FOR
REGISTRATION
23RD OCTOBER
2022

PARTICIPATING TEAM NAME

TOURNAMENT NAME
VETERAN'S T20 SMASH 2022

	FULL NAME OF TEAM MANAGER	PHONE NUMBER	NATIONALITY	ID or PP No.	DATE of BIRTH
1					
2					

	FULL NAME OF TEAM PLAYERS (MAXIMUM 14 PLAYERS)	PHONE NUMBER	NATIONALITY	ID or PP No.	DATE of BIRTH
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					

TEAM SIGNATURE / SEAL

RECEIVED (CBM OFFICIAL USE ONLY)	
NAME	
ID/PP No.	
DATE	
SIGNATURE	