



SHIMLACRICKETCARNIVAL

AN ANTI-CHITTA, ANTI-DRUG YOUTH MOVEMENT

SHIMLA CRICKET CARNIVAL — 2026 —

— ★ नशा छोड़ो - खेल खेलो ★ —

DEPARTMENTAL REGISTRATION FORM



70188-71608
80953-77000

Team Name :

Department :

Captain Name :

Mobile No. :

Paste Passport Size
(Captain's Photo)
Here

SCAN & PAY ENTRY FEE
(₹11,000 / TEAM)



UPI ID : hsc9816190640@ucobank

G Pay PhonePe paytm BHIM UPI

PLAYER DETAILS

Sr. No.	Name of the Player	ID Number (Aadhar/Voter ID)	Mobile No.	Kit Size
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				

DECLARATION

I, _____ S/o / D/o _____, Captain of Team _____, hereby declare that all the information provided in this registration form is true and correct to the best of my knowledge and belief.

I further undertake that all team members will follow the rules, regulations, discipline, and code of conduct of the Shimla Cricket Carnival 2026. In case any information is found to be false or if any player/team is involved in unfair practices, misconduct, or violation of tournament rules, the organizing committee shall have full authority to take appropriate action, including cancellation of registration or disqualification from the tournament.

I also confirm that all participating players are physically fit and voluntarily participating in the tournament at their own responsibility.

Date : _____

Signature of Captain

Signature of
Organising Authority

Place : _____