

V.O.Chidambaranar Port Authority
Sports Council

"National Sports Day"
Cycle Race Challenge 2025 for School children

Entry form

1.	Full Name	
2.	Age	
3.	Class	
4.	School Name	
5.	Gender	Male / Female
6.	Contact Number (Parent / Guardian)	
7.	Address	
8.	Have your Own bicycle	
9.	Medical Conditions (if any)	
10.	Parent/Guardian Consent: I hereby allow my child to participate in the Cycle Race organized as part of National Sports Day 2025. I acknowledge that he/she is participating voluntarily and will follow all safety and race guidelines.	

Signature of Parent / Guardian