## Should Apply only through SLASU registered Club or School

Reg . No :	

## **Coaches Registration - 2019**

New Registration Please Indicate your Field Coaching Full Name			Renew		Photograph (Passport Size)	
Name With Initials (Mr./Mrs./Miss)						
Address (Private)						
Address (Official)						
Contact No (Private )			Contact No (Official)			
Email Address						
Date of Birth			NIC No			
Designation			Service Experienc			
Professional Qualificati	ions (Sports)					
Course	Course		Institute		Duration	
Academic Academic Qualification : G.C.E. (O/L)						
Subject			Subject		Grade	