



# भारतीय तीरंदाजी संघ

## ARCHERY ASSOCIATION OF INDIA

Office Address : DDA Yamuna Sports Complex, Gate No.2, Near Archery Ground, Surajmal Vihar, Delhi-110092  
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Executive Member  
(Women)

Ref.No.AAI/PNAC-2018/2019

February 2, 2019

**All AAI Affiliated State/UT Archery Associations, Associate Members & Individual Members All Executive Members of the AAI**

**Subject : 3<sup>rd</sup> Para ( Recurve, Compound & Indian Round) National (M & W) Archery Championship at SAI NBA, Rohtak, Haryana from 2-5 March, 2019 (inclusive of arrival and departure days).**

Dear Sir/Madam

I am directed to inform you that the **3<sup>rd</sup> Para Recurve, Compound & Indian Round National (Men & Women) Archery Championship-2018** will be held at SAI, Rohtak, Haryana from 2-5 March 2019 (inclusive of arrival and departure days).

Member State Archery Associations/Associate Members of Archery Association of India are responsible for sending entries. Para Archers practicing at various centres/locations are advised to approach their respective member Associations/Units for registering their entries for the 3<sup>rd</sup> Para National Archery Championship.

There will no online entry for Para National. All entries would be accepted through email or post by the AAI. **Therefore, you are requested to fill up the form attached herewith and return it to Archery Association of India on or before 25<sup>th</sup> February, 2019 at indian.archery@yahoo.in.**

AAI would recommend the names of top performers of 3<sup>rd</sup> Para National Archery Championship for the 5<sup>th</sup> FAZZA Para-Archery World Ranking Tournament to be held at Dubai from 10<sup>th</sup> to 16<sup>th</sup> April, 2019.

Railway Concession Certificate (RCC) would be forwarded to the members, as and when we receive from the SAI.

Regards and best wishes

Yours sincerely

(GUNJAN ABROL)

Assistant Secretary, AAI

**Encl. : Entry Form**

**FORM - 2**

**3<sup>rd</sup> PARA NATIONAL ARCHERY CHAMPIONSHIP  
(RECURVE, COMPOUND AND INDIAN ROUND)**

**Venue: SAI, NBA, Rohtak**

**Date: 3-4 March, 2019**

**STATE PARTICIPATION REGISTRATION FORM**

**(To be filled up in BLOCK letters)**

**Name of State/Unit:** \_\_\_\_\_

**FOR MEN/BOYS**

**INDIAN ROUND**

S.No.	Name	D.O.B.	Father's Name	Ph No.

**RECURVE**

S.No.	Name	D.O.B.	Father's Name	Ph No.

**COMPOUND**

S.No.	Name	D.O.B.	Father's Name	Ph No.

**FOR WOMEN/GIRLS**

**INDIAN ROUND**

S.No.	Name	D.O.B.	Father's Name	Ph No.

**RECURVE**

S.No.	Name	D.O.B.	Father's Name	Ph No.

**COMPOUND**

S.No.	Name	D.O.B.	Father's Name	Ph No.

**COACH/COACHES :**

**MANAGER:**

Signature of President / Secretary

Full Name: \_\_\_\_\_

Seal \_\_\_\_\_

Ph. No: \_\_\_\_\_

Email id \_\_\_\_\_

Date: \_\_\_\_\_