

## MAHARASHTRA AMATEUR GYMNASTICS ASSOCIATION

(Affiliated to Gymnastics Federation of India & Maharashtra Olympic Association) Public Trust Regn. No.: F/1408 : Soc. Registration No.: 15/1966 State Sports Council, Pune Registration No.: 18/X-1091/KS-31 **Secretariat:** Flat No.4/77, Vinashri, Mahesh Society, Bibwewadi, Pune-411037 **President Add:** Shantiniketan Lok Vidhya Peeth, Sangli-416416: Tel: 9822555333 Website: www.magaindia.com : Email: magaindia1@gmail.com: Tel: 7738712200

## AGE CERTIFICATE

To, The Secretary General, Gymnastics Federation of India. Photo

I hereby certify that Mr./Ms. ..... son/daughter of ...... studying in ...... class. His/Her date of birth as per the School/College record is ...... His/Her specimen signature & left hand thumb impression are affixed in my presence. His/Her visible identification marks are given below and photograph is also affixed at the given place.

(Left Hand Thumb Impression)

(Name, Signature & Seal of Head of School/College)

(Signature of the Gymnast)

(Name, Signature & Seal of the Gymnastics Institution/Club)

Visible Identification Marks 1) .....

2) .....

**Note:** (1) This certificate will be accepted only if it is signed by Principal / Vice Principal / Head Master of the institution concerned. (2) It is obligatory that the Gymnast should be on the roll of the Institution / Club / District at least for 3 months prior to submission of this certificate. (3) The Seal of School / College / Institution / Club / District Gymnastics Association over the photograph is essential.

## Declaration by M.A.G.A. & District Gymnastics Association:

I hereby declare that Mr./Ms. ..... is a registered gymnast of our District Association & the particulars that are given above are correct to the best of my knowledge and I am personally liable for its correctness.

General Secretary (M.A.G.A.) with Seal

Name, Signature & Seal of District Secretary

Place: Sangli : Dt: .....