

## APPLICATION FORM FOR THE ACCREDITATION TO ASSAM CRICKET ASSOCIATION

- 1) Name of the coaching Centre/Academy-----
- 2) Name of In charge-----
- 3) Address-----  
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- 4) Mail Id-----
- 5) Phone No a) -----b) -----
- 6) Date of commencement -----
- 7) Registered -----yes/No ----- if yes date and No of registration-----
- 8) Total area available for coaching activity-----
- 9) Detail of facilities available -
  - a) Total Playing area-----
  - b) Number and nature of pitches-----Turf/cement/matting/artificial-----
  - c) Bowling machine-----
  - d) Washroom-----
  - e) Number of Qualified coaches-----Non-Qualified coaches-----
  - f) Number of practice match arranged/played during year-----
  - g) Number of leather ball used daily-----
  - h) Floodlights-----
  - i) Coaching Timing-Morning-----Evening-----
- 10) Number of regular trainees attending the coaching ---Morning-----Evening-----
- 11) U-12yrs-----U-15yrs-----U-19yrs----- Above 19yrs----- Total-----  
Achievements of Individual player (District/State/National) in last three years (2017-18, 2018-19, 2019 20,)
- 12) **Separate sheet may be attached year wise in the following format if needed.**

Sr No	Name	Name of competition	Dates of competition	Venue	Position

### Total players Year wise achievements

Year	District	State	National	IPL/International
2017-18				
2018-19				
2019-20				
Total				

I solemnly declare that above given details information are true to best of my knowledge, if found incorrect our candidature may be treated cancelled.

Signature and seal  
Name

(Note- All the information shall be typed in capital letter in this form)