



Department of student activities/ Male

Sports Activities Unit / Male

Join Our Sports Teams

Full Name.....Date of birth.....

Nationality.....Mobile number.....

Student ID.....College .....

Address.....

City.....Emirate.....

Hostel name .....Building.....Room N.....

**Please mark the sports you want to join**

- |   |                                     |                                     |                                       |
|---|-------------------------------------|-------------------------------------|---------------------------------------|
| <input type="checkbox"/> Hand ball        | <input type="checkbox"/> Basketball | <input type="checkbox"/> volleyball | <input type="checkbox"/> Football     |
| <input type="checkbox"/> Beach Volleyball | <input type="checkbox"/> Squash     | <input type="checkbox"/> Tennis     | <input type="checkbox"/> Table tennis |
| <input type="checkbox"/> Karate           | <input type="checkbox"/> Taekwondo  | <input type="checkbox"/> Judo       | <input type="checkbox"/> Jiujutsu     |
| <input type="checkbox"/> Horse Riding     | <input type="checkbox"/> Fencing    | <input type="checkbox"/> Athletics  | <input type="checkbox"/> Swimming     |
| <input type="checkbox"/> Boxing           | <input type="checkbox"/> Chess      | <input type="checkbox"/> Baby foot  | <input type="checkbox"/> Billiard     |
| <input type="checkbox"/> Power Training   | <input type="checkbox"/> Shooting   | <input type="checkbox"/> Bowling    | <input type="checkbox"/> Billiard     |

Other sports .....

Were you a member of a school sports team?

If you are a club player, mention the name of the club.....

Signature.....