



# FEDERACAO DE CRIQUETE TIMOR LESTE

## OPEN TRIALS FOR BOWLERS AND BATSMAN

Conducted by National Cricket ACADEMY

Organized by FDCTL

### APPLICATION FORM FOR REGISTRATION

Venue : Tasi Tolu

- *The organizers have entire right to cancel / postpone the event for reasons not required to be made public. No candidate shall challenge the decision in this regard.*
- *Only the boy's who are eligible for the trials*
- *\$ 100 Registration Fee.*
- *Player should carry any cricket kit with them for the trials ( Ball and Bat ).*
- *It is compulsory to wear cricket T-shirt + cricket trouser + sports shoes + Cap. Players should carry a small towel + own water bottles.*
- *Application form is available on our Official website ([www.crickettl.com](http://www.crickettl.com)) and also can send request at ([atletismotls@gmail.com](mailto:atletismotls@gmail.com)) for hard digital copy.*
- *This registration form should be submitted BEFORE September 28, 2023 by email or directly in FDC-TL office. Regarding trails day/date, will be informed to participants by email.*
- *Registered players will received permission letter and they should report at the venue.*

#### PI. Note

While attending the trials the player should carry original ID + 1 photocopy ID

Players who are shortlisted after the trials will have to submit the all requirement documents

1. **Players Name in Full** :
2. **Date of Birth** :
3. **Address** :
4. **Contact No** :
5. **Email ID** :
6. **Club & Nationality** :
7. **Proficiency**

Fast Bowlers		Spin Bowlers	
Right Arm		Right Arm Off Break	
Left Arm		Right Arm Leg Break	
Batsman	Allrounder	Left Arm Orthodox	

8. Are you physically fit (in all aspects) to attend the trials **YES or NO**



## **DECLARATION**

1. I, hereby, declare that my parents are aware of my participation in the trials and have no objection of whatsoever. I have informed my parents about the rules / terms and conditions of the event.
2. I, hereby, indemnify the organizers from any causality / mishap / any loss to me / my property during the process of attending the trials.
3. I hereby give my consent for emergency medical care prescribed by authorized doctor and that thid care may be given under whatever conditions are necessary to preserve the my life or well-being. The costs shall be come by me / my family.
4. I hereby give my consent to the organizers to take photographs, video recordings, and/or sound recording of my participation in documenting the activities
5. I, hereby, declare that all the details given above in the registration form are true and correct to the best of my knowledge and belief. In the event of any information being found false or incorrect or myself being found not eligibility criteria for participation, my name is liable be cancelled without any notice.

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**Signature of Player / Date**

***FOR OFFICE USE***  
***Registration No. Issued***

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