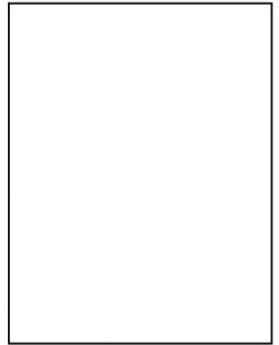




# HANDBALL FEDERATION OF INDIA

## AGE CERTIFICATE (To be filled up in block letters)



This is to certify that .....

S/D/o of .....

is a student of class ..... and his/her date of birth is .....

and in word .....

according to the register (Registration Number .....) of Institute.

Signature with seal of Head of Institution

Seal of the Institution

Name of Head of Institution	
<b>Address of the Institution</b>	
Address of Premises	
Name of the Road / Street	
Name of the Village / Town	
Name of the Post Office	
Name of the District with Pin Code	
Name of the State	
Phone & Fax Number with STD Code	
E-Mail ID	

Signature with Seal of the President / Secretary of the Association along with Association's Seal

**Verified and Allowed / Disallowed**