



**UNIVERSITY OF BALOCHISTAN, QUETTA
DIRECTORATE OF SPORTS**



Office Ph: +92-81-2448787

MEMBERSHIP FORM

Serial No: _____ Dated: _____

1. Name: _____ 2. Father's Name: _____
 3. Gender: Male Female 4. Occupation: _____
 5. Designation: _____
 6. Office Name / University / College / School: _____
 7. Residential Address: _____
 8. Office Phone No: _____ 9. Resident Phone No: _____
 10. E-Mail Address: _____ 11. Cell No: _____
 12. Sports (If Any): _____ 13. Timing: Morning Evening

14. In Case of Emergency Contact Person			
Name	Resident Phone No	Cell No	E-Mail Address

15. Blood Group: _____ 16. Fee Deposited Rs: _____
 17. Challan No & Date: _____

18. Name of Reference Person (Must be UoB Employee)			
Name	Department	Designation	Cell No

Important Note: Following Documents to be attached with Form:

- Two Recent Photographs
- Copy of C.N.I.C.
- Reference Person C.N.I.C & Employee Card.
- Copy No. 2 of Fee Deposited Challan.

GENERAL RULES FOR MEMBERSHIP

- Members have to pay yearly membership fee **2000/- (@Rs. 5.47 per day)** in only H.B.L / Allied Bank UoB Branch, Sariab Road, Quetta.
- Membership is available in Walking, Football, Cricket, Athletics, Badminton, Table Tennis, Squash, Volleyball, Basketball, Jogging and Fitness Exercises etc.
- The office of the Directorate of Sports UoB will not responsible for loss of any valuables.
- No Member will be allowed to enter the playing court / field without proper kit.
- No Member is allowed to bring any type of fire arms inside the complex / ground.
- Vehicles & Motorbikes must be parked in the proper parking area.
- Misbehave of Security staffs and misconduct in the complex / ground can immediately lead to termination of membership.
- The UoB reserves the right to turn down any application and already provided membership can be terminated without assigning any reason.
- The UoB reserves the right to change the timing of any member without assigning any reason.

“Please Signe the below mentioned instructions if you are agree”

- I have read all the rules and understood them in true sense _____
- My Membership shall stand cancelled / terminated if I found guilty of violating any of the above rules _____.
- I will be responsible for repair / loss of any damage caused by me _____.

➤ **If Members have any problem, contact to ground in-charge Cell No: +92-333-7837546**

Applicant Signature: _____

Guardian's Signature
 With C.N.I.C copy for less than 18 years members.

Director Sports
 University of Balochistan, Quetta

REGISTRAR
 University of Balochistan, Quetta

(For Office Use): Card Issue Date: _____ Card Expiry Date: _____