



**ATTACH
2 PHOTOS EACH
OF ALL
PARTICIPATING
MEMBERS
(write name at the
back of each photo)**

TUG OF WAR REGISTRATION FORM

Team Name: _____

Team Head Name: _____

Team Head Address: _____

Team Head Contact: _____

Team Head Email: _____

TH Institution: _____

Name & Contact of ONE other Team Member: _____

Names of Team Members (6-10, separated by commas):

