**MA PLAYER REPRESENTATIVE**

**NOMINATION FORM**

**COUNTRY: ………………………..**

**Profile of Representative:**

|  |  |
| --- | --- |
| **First Name** |  |
| **Last Name** |  |
| **Gender** |  |
| **Date of Birth** |  |
| **Email address** |  |
| **Mobile Number (What’s App)** |  |
| **BWF ID** |  |
| **Language/s Spoken** |  |
| **Last Tournament Played (with date)** |  |

**Endorsed by (Association)**

**Name and Position in Association**

**Signature Date**

  **Seal of Association**