

# Self Undertaking

I, \_\_\_\_\_ (Player Name), S/o D/o W/o  
\_\_\_\_\_ (Father's Name), resident of \_\_\_\_\_ (Full Address),  
aged \_\_\_\_ (current age) years, do hereby solemnly affirm and declare as follows:

1. That I am a resident of the above-mentioned address.
2. That my Aadhaar Number is \_\_\_\_\_.
3. That my Date of Birth is \_\_\_\_\_.
4. That I have no conflict of interest, as outlined in the Memorandum and Rules & Regulations of the Arm Wrestling Federation.
5. That I have not been convicted in any criminal proceedings by any court of law.
6. That I am not financially interested in or managing any affiliated arm wrestling club, academy, or institution. If applicable, details are provided below:

\_\_\_\_\_  
\_\_\_\_\_

7. That I am not involved in the operation or management of any affiliated arm wrestling club, academy, club, or institution.
8. That I understand and agree that participation in any unofficial arm wrestling events without prior permission from the People Arm Wrestling Federation of India (PAFI) is prohibited. If found guilty of such participation, PAFI reserves the right to initiate appropriate disciplinary action against me.

I hereby declare that all the information provided above is true and correct to the best of my knowledge and belief. I agree that if any information is found to be false or incorrect, the People Arm Wrestling Federation of India (PAFI) reserves the right to take necessary action against me.

## Verification:

Verified that the contents of my above affidavit are true and correct to the best of my knowledge and belief and no part of it is false and nothing has been concealed therein.

Place: \_\_\_\_\_

Date: \_\_\_\_\_

Signature (in blue ink): \_\_\_\_\_