



ASIAN SHOOTING CONFEDERATION
14TH ASIAN YOUTH TRAINING CAMP - SKEET
24-31 JAN 2026 DOHA, QATAR
REGISTRATION FORM FOR COACH



(Please submit a clear photo and passport copies (valid for more than six months at the time of entry to Qatar) of the participants along with this Form by no later than **31-OCT-2025**)

Family name _____ **First Name** _____ **D.O.B.** _____
Place of birth _____ **Nationality** _____ **Gender** _____
Passport # _____ **Place of Issue** _____ **Date of expiry** _____
Contact email _____ **Mobile #** _____

Present position related to the Shooting Sport _____

Achievements in Shooting Sport as athlete (Personal best):

Year	Name of competition	Event	Achievement

Achievements in Coaching:

Position: _____

Year	Name of athlete	Event	Name of competition	Category	Achievement

Position: _____

Year	Name of athlete	Event	Name of competition	Category	Achievement

Position: _____

Year	Name of athlete	Event	Name of competition	Category	Achievement

TO BE FILLED IN BY THE NATIONAL SHOOTING FEDERATION

Name of National Federation: _____

Name and Title of Authorizing Person: _____

Email Address of Federation: _____

Mobile Number of Authorizing Person: _____

Signature & Seal: _____



ASIAN SHOOTING CONFEDERATION
14TH ASIAN YOUTH TRAINING CAMP - SKEET
24-31 JAN 2026 DOHA, QATAR
REGISTRATION FORM FOR ATHLETE



(Please submit a clear photo and passport copies (valid for more than six months at the time of entry to Qatar) of the participants along with this Form by no later than **31-OCT-2025**)

Family name _____ **First Name** _____ **D.O.B.** _____
Place of birth _____ **Nationality** _____ **Gender** _____
Passport # _____ **Place of Issue** _____ **Date of expiry** _____
Contact email _____ **Mobile #** _____

Practicing shooting since (year, month): _____

Personal best in competitions (qualification scores, comp. ranking):

Year	Name of competition	Event	Achievement

Personal Gun(s)

<u>Gun 1</u>	<u>Gun 2</u>
Type (Shotgun)	Type (Shotgun)
Manufacturer	Manufacturer
Model	Model
Serial number	Serial number
Caliber	Caliber
Special barrel or trigger	Special barrel or trigger

TO BE FILLED IN BY THE NATIONAL SHOOTING FEDERATION

Name of National Federation:

Name and Title of Authorizing Person:

Email Address of Federation:

Mobile Number of Authorizing Person:

Signature & Seal: