AIR TRAINING CORPS

INITIAL RECORD FORM

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SURNAME	OTHER NAMES	DATE OF BIRTH
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ADDRESS	NEXT OF K NAME	(IN
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NATIONALITY	RELIGION	SCHOOL
PHYSICAL FITNESS i.e. any illness or disability such as epilepsy, asthma etc		
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INTEREST HOBBIES SPORTS; ABILITY TO SWIM		
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MEMBERSHIP OF OTHER ORGANISATION		
Manager and Article and Article		
REASON FOR JOINING ATC		
INTRODUCED BY		
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