



**ALL INDIA INTER UNIVERSITY
SHOOTING (M&W) CHAMPIONSHIP 2025-26**
AIR PISTOL | AIR RIFLE



REGISTRATION FORM

Name of the University: **MANIPUR UNIVERSITY**

Official Address: **CANCHIPUR, IMPHAL WEST, MANIPUR**

E-mail ID: **DRPRADEEPADSMU@GMAIL.COM**

Phone Number: **80141 50295**

Manager for Shooting Team: **NILAKANTA LONGJAM**

Address: **MANIPUR UNIV., CANCHIPUR, IW, MANIPUR**

E-mail ID: **DRPRADEEPADSMU@GMAIL.COM**

Phone Number: **89741 11455**

Alternate Phone Number:

LIST OF SHOOTING EVENTS

WOMEN

- | | | | | | |
|-------------------|--------------------------|-----|--------------------------|------|--------------------------|
| 1. 10M Air Rifle | <input type="checkbox"/> | IND | <input type="checkbox"/> | Team | <input type="checkbox"/> |
| 2. 10M Air Pistol | <input type="checkbox"/> | IND | <input type="checkbox"/> | Team | <input type="checkbox"/> |

MEN ✓

- | | | | | | |
|-------------------|-------------------------------------|-----|-------------------------------------|------|--------------------------|
| 1. 10M Air Rifle | <input type="checkbox"/> | IND | <input type="checkbox"/> | Team | <input type="checkbox"/> |
| 2. 10M Air Pistol | <input checked="" type="checkbox"/> | IND | <input checked="" type="checkbox"/> | Team | <input type="checkbox"/> |

MIXED TEAM

- | | |
|-------------------|--------------------------|
| 1. 10M Air Rifle | <input type="checkbox"/> |
| 2. 10M Air Pistol | <input type="checkbox"/> |





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Individual

(Please make copies of this form and fill one for every event)

Event: **10 MTS AIR PISTOL**

Men: Women:

Name: **AMAKCHAM YOHENBA MEITEI**

Phone No.: **80141 50295**

Name:

Phone No.:

Name:

Phone No.:

Name:

Phone No.:

