



# BADMINTON ASSOCIATION OF INDIA

(Affiliated to the Badminton World Federation and Badminton Asia Confederation)

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16<sup>th</sup> May 2026

BAI/GEN/BAI ID/2025/073

Hony. Secretaries  
All Affiliated Units  
Badminton Association of India

## UPDATED GUIDELINES FOR BAI REGISTRATION AND TOURNAMENT CERTIFICATES

Dear All,

With reference to the recent updates issued by the Badminton Association of India in the following guidelines are hereby updated for strict compliance by all State Associations:

1. All players are requested to pay the new BAI Registration Fee only through the official BAI QR Code and submit the payment receipt along with the required documents for reference. **BAI will not accept Demand Drafts (DDs) with effect from 1<sup>st</sup> June 2026.**
2. Surname is mandatory for new BAI registration. In case the surname is not mentioned, the player's registration will not be processed until the surname is provided.
3. All players can access their tournament certificates through the Digi-Locker Wallet of the Government of India for tournaments conducted from the year 2025 onwards.

All State Associations are requested to circulate the above instructions among players, and concerned Units and ensure strict compliance.

Thanking you

Yours sincerely

(Sanjay Mishra)  
Hony. General Secretary





**BADMINTON ASSOCIATION OF INDIA**  
**BAI REGISTRATION FORM FOR NEW PLAYERS**

Please paste  
photograph

Do not staple

1. Surname in Full (Surname is must in Capital letters) \_\_\_\_\_  
Given Name (in capital letters) \_\_\_\_\_
2. Gender **Male** **Female**
3. Father's Name Full \_\_\_\_\_  
Surname Given Name
4. Mother's Name Full \_\_\_\_\_  
Surname Given Name
5. Date of Birth \_\_\_\_\_  
Date Month Year
6. Place of Birth \_\_\_\_\_  
Place District State
7. Place of Birth Details \_\_\_\_\_  
Actual Birth Place Details as Name, Address, etc
8. Date of Registration of Birth \_\_\_\_\_  
Date Month Year
9. Two Identification Marks:  
a. \_\_\_\_\_  
b. \_\_\_\_\_
10. Communication Address: \_\_\_\_\_  
\_\_\_\_\_
- Email Address \_\_\_\_\_ Mobile No. \_\_\_\_\_
11. Age as on 1st January of calendar Year of the date of this certificate \_\_\_\_\_  
Year Month
12. In case of students, class in which studying as 1st January of the calendar year of the date of this certificate \_\_\_\_\_
13. Give Details of Educational Institution studied as per attached sheet.

We confirm that the above information is true and correct. (Please ensure that the date of certifying this for is filled in space provided below.)

Signature of the Players	Left Hand Thumb Impression of Player	Signature of Parent / Guardian
Signature of Hony. Secretary of the District Association	Signature of Hony. Secretary of the State Association	Signature of the Organisation Head/Gazetted Officer
Seal of the District Association	Seal of the State Association	Seal of the Organisation Head/Gazetted Officer

Date

Date

Date





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Badminton Association of India



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