

RISK CERTIFICATE

This is to certify that I, No. Rank

Name Father's Name Sri

College Unit

Volunteer to attend the Camp/Course being held at

from to at my own risk.

Date Sign. of Applicant

Countersigned by Address

(Father/Guardian)

Name in Full

Parent's Consent Certificate

This is to certify that I have no objection to spare my son / ward No.

Rank Name College

Unit to attend the Camp/Course being held at

from to

Station

Dated (Sig. of Parent / Guardian)

Countersigned Countersigned Name and address

(Head of the Institution) (Stamp) (CO Unit)

MEDICAL CERTIFICATE (NCC OFFICER'S AND CADETS)

1. A. Certified that I have examined No. Rank

Name College

Unit and found him fit to undergo training of strenuous nature on the Camp / Course being held at from to

B. 1. I also certify that the above mentioned cadet has been inoculated / vaccinated

2. That the Cadet has been protected against small pox, typhoid and cholera.

3. Signature of Cadet

4. Signature of Cadet is Attested.

Station **COUNTERSIGNED** (Sign. of Medical Officer)

Dated (Stamp)

Permission Attested by NCC Officer / Principal

As the father / guardian has given the permission to his son / daughter / ward to attend the above NCC Camp, I therefore also permit him for the same.

Counter Signature

Date Principal Sign. of NCC Officer Seal

ARRIVAL SLIP

No. Rank Name

has been detailed to attend the Camp / Course being held
 at from to

Station

Date (Sign. of CO. Unit)

Indemnity Certificate

In consideration of my being nominated at my request as a participant in any Camp/Course/Adventure Trg activities (like Mountaineering, Rock Climbing, Trekking, Hiking, Skking, Cycling & Expeditions & travelling. I under take & agree that neither I, nor executor, nor administrator will make any claim against the Govt. of India or against any Officer/JCO/OR Civilian MT Driver or against any person in the Service of Govt. of India in respect of any loss or injury to the property or person (including injury resulting in death) which I may suffer while of inconsequence of my being participated & I understand and that no compensation will be paid by the Govt. of India or any Officer/JCO/OR Civilian MT Driver and in respect of any such loss or injury and agree so as to bind my self executors and administrator to indemnity the Govt. of India Officer/JCO/OR/Civilian MT Driver and any person in the service of Govt. of India against any claim which may be any third party against them or any of them arising out of any act of default on my part during or in connection of said training and journey.

Station (Sig. of the applicant)
 Date Name in block letters
 with address

In presence of Witness
 Signature 1 2.
 with date
 Name in block letters
 Full Address

Countersigned Countersigned
 (Father's Guardian)
 Name in block letter Countersigned (Head of the Institution)
 Address
 CO Unit

DROWNING / ACCIDENT CERTIFICATE

I know that there is deep water near the camp site or enroute and area of the water is OUT OF BOUND. If I shall go there, I shall do so at my own risk.

I have been explained the cadets regarding the precautions to be taken against drowning accident and have understood them. I have been told not to go near deep water in the vicinity by the incharge. If I go to anyone of these OUT OF BOUND areas, I shall do so at my own risk.

Name of Unit :
 Name of Gp HQ :
 Name of NCC Dte. :

Sl.No.	Regtl. No.	Rank	Name	Signature of Cadet

Certified that I have explained the orders regarding precautions to be taken against drowning accident and shown to the Cadets "OUT OF BOUND AREAS" The cadet have signed in my presence.

Station Signature of CO Unit
 Dated

ATTESTED BY THE PRINCIPAL / HEAD MASTER

Certified that the above named Officer/Cadets is on the roll of the College/School and can be spared for the above trekking/expedition Camp.

Station Signature of Principal/Head Master
 Dated