Risk, Permission & Arrival Slip

1. RISK CERTIFICATE

This is certify that I, No	Rank
Name	Father's Name Shri
of	am
volunteer to attend the	Camp/Course being held at
from	to at my own risk.

Date..... Counter Signed by

(Father/Guardian)

Name in Full.....

2. PERMISSION ATTESTED BY NCC OFFICER/PRINCIPAL

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

Date :

Sign of NCC Officer Seal

Sign. Of Applicant

Address.....

.....

MEDICAL CERTIFICATE

1.	Certified that I have examined No.	Rank	
Name	·		Son/daughter/
Ward	of	of	
Institu	tion and Unit		_ in accordance with
the st	andard laid down in NCC Act & Rules and	found him fit to undergo	training of strenuous
nature	e in	(Name of Camp/Y	EP) being conducted
from_	to		
2.	I also certify that the above mentioned O Against. (a) Typhoid (TAB) (b) Tetanus (TT) (c) Tuberculosis (BCG)	fficers/Cadet has been ir	noculated/Vaccinated

(d) Hepatitis 'B'

NOTE :-

1. Ser 2 (d) is applicable for cadets proceeding on YEP only.

2. Strike out same if not applicable

Station : Date : Signature of Medical Officer (Name in Block Leters with) designation & Seal

4. ARRIVAL SLIP

No	Rank	Name	
has been detailed to	attend the		Camp/Course being
held at	from	to	
Station Date			(Sign. of CO Unit)

INDEMMITY CERTIFICATE

In consideration of my being nominated at my request as Participation any Camps Course/Adventure Trg. activities like Mountaineering, Rock Climbing Trekking Hiking, Sking, Cyling and Expendition and travelling. I undertake and agree that neither I nor executor of administration will make any claim against the Government of India or against any officer JCO/or Civilian MT Driver or against any person 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 suffer while or in consequence of my being participated and I understand that no compansation will be paid by the Govt. of India or any officer JCO/or Civillan MT Driver and in respect of any such loss of injury and I agreed so as to bind, my self, executor and administrator to indemnity the Govt. of India against any claim which may be any third party against them or any of them arising out any actoot on my part during or in connection of said travelling/journey.

Stat	ion	
Date		(Sign. of the Applicant)
Sign	ned by Shri	No
-	presence of)	Rank
		Name in (Block Letters)
		Address
Witr	ness	
1.	Signature	
	Name in Block Letters	
	Address	
		Countersigned by
2.	Signature	(Father/Guardian)
	Name in Block Letters	Name in Block Letters
	Address	Address
	ATTESTED BY THE COY COM	IMANDER / PRINCIPAL
Stat	ion	Sign
Date	9	With Seal

DROWNING CERTIFICATE

I, No	. Rank	Name	
	attending Name type of Cam	p/Trak	
	At	know	that there is deep water
near the camp site and	that the near to the water is C	OUT OF BOUND,	if I go, there I shall do so
entirely at my own risk.			

Date:

Signature of Cadet