



The Bharat Scouts & Guides, National Headquarters
Lakshmi Mazumdar Bhawan, 16, M.G. Marg, I.P. Estate, New Delhi- 110002.

APPLICATION FORM FOR NATIONAL LEVEL WATER REGATTA

1. Name of the Applicant : _____
2. Father's Name : _____
3. Home Address : _____

- Distt: _____ State: _____
- Pin: _____ Phone: _____
- Email ID _____
4. Date of Birth : _____
5. Experience in Scouting / Guiding Activities: _____

6. Experience in Adventure Activities : _____

7. Nearest Telephone No. : _____
(For Emergency Contact)

Recommended for admission in the Water activity Programmes to be held at Mangalore from 27.01.2016 to 31.01.2016.

Risk Certificate and Medical Certificate are enclosed.

District Commissioner (S/G)

State Secretary

FOR OFFICE USE

Admitted / Not Admitted: _____

Receipt No: _____ Date: _____ Rs. _____

Date: _____

Leader of the Water Regatta Programme

RISK CERTIFICATE
(For Use of Applicants)

It is certified that my Son/ Daughter/ Ward Mr. / Miss _____ is joining the above mentioned Programme with my consent and the Organizer shall not be responsible for any illness, injury or accident during the event or journey periods for the purpose. It is further certified that he/ she is physically fit to undergo the said vigorous programme.

Date:

Signature of Parent/ Guardian

Name : _____

Relationship with Participants: _____

MEDICAL CERTIFICATE

Name : _____

Address: _____

Date of Birth: _____ Single / Married: _____

1. Present / Past illness : _____
2. Injuries / Operation Undergone and Present Condition: _____
3. Any known Allergy to drugs/foodstuff: _____
4. Blood Group: _____
5. Is the applicant is suffering from
 - (i) An Infectious disease (Yes / No)
 - (ii) A Skin (Yes / No)
 - (iii) Mental disease (Yes / No)
 - (iv) Heart trouble (Yes / No)
 - (v) Any other disease / defect (Yes / No)

I, on this Date _____ have Examined Mr/ Miss _____ and found him / her medically fit / unfit to undergo Water activity Programme at Mangalore from 27.01.2016 to 31.01.2016.

Date: _____

MEDICAL OFFICER
REGD. NO. & DESIGNATION

COUNTERSIGNED BY
DISTRICT COMMISSIONER (S/G)