APPLICATION FORM FOR INDIAN PARTICIPANTS 23nd INTERNATIONAL ADVENTURE PROGRAMME FROM 02.02.2023 TO 08.02.2023

1.	Name of the Applicant (In Capital) :				
2.	Father's Name :				
2. 3.	Home Address (In Capital) :				
5.					
4.		PinCode			
5.	Date of Birth				
6.	Telephone/Mobile No				
7.	Aadhar No:				
8.	Experience in Scouting /Guiding				
9.	Dates of National Adventure Programme, you haveattended				
10.	Have you attended any International Event? If so, give details				
11.	Vegetarian or Non Vegetarian:				
12.	Special Hobbies or any other information: _				
13.	3. Are you Covid Vaccinated: Yes/No. If yes, attach Vaccination Certificate. If no, produce RT				
	PCR Negative Test Report during registration	on.			
14.	In case of Online transfer-SBI Colle	ct Gateway/ Online Transfer	(Transaction		
	Details) UTR Number		Date		

_____ (Copy Enclosed)

Signature of the Applicant

DECLARATION

- > I agree to adhere to the discipline of the movement and programme in particular and abide by the rules and regulations of the Institute during the whole event.
- > In case of any accident, illness or injury, manmade or natural, I will not hold the National Adventure Institute of the Bharat Scouts and Guides responsible at all.
- > I further declare that I have not been in contact with any infectious disease for the past one month and that I am keeping good health & physically fit to undergo the Adventure Programme.

Signature of the Applicant

FOR OFFICE USE ONLY

Selected/Not Selected

Adventure Programme Officer

1. Reg. Fee	Rs	R.N	Date	
2. Scout/ Guide/ W.	Fare Fund Rs	R.N	Date	

Rs______R.N. _____Date _____ 3. Camp Fee

Office Secretary