



The Bharat Scouts and Guides, National Headquarters

Lakshmi Mazumdar Bhawan, 16, M.G. Marg, I.P. Estate, New Delhi- 110002.

APPLICATION FORM

Photo

1. Name of the Applicant : _____

BSGUID No.

--	--	--	--	--	--	--	--	--	--	--	--

2. Father's Name : _____

3. Home Address : _____

Distt.: _____ State: _____

Pin: _____ Mobile & WhatsApp No: _____

E-mail: _____ Aadhar No: _____

4. Date of Birth : **DD/MM/YYYY**
In word _____

5. Experience in Scouting / Guiding Activities: _____

6. Any Experience in Trekking: _____

7. Nearest Telephone/Mobile No.: _____

Recommended for admission in the ***National Level Adult Leader Trekking programme on fit India initiative***, to be held at Trikutta Bhawan, Katra, J & K from 17th to 21st Nov. 2023. Risk Certificate and Medical Certificate are enclosed.

SOC (S/G)

State Secretary

FOR OFFICE USE

Admitted / Not Admitted: _____

Receipt No: _____ Date: _____ Rs. _____

Date: _____

Leader of the Camp

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 Infection disease (Yes / No)

(ii) Skin (Yes / No)

(iii) Mental disease (Yes / No)

(iv) Heart trouble/Asthma (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 a ***National Level Adult Leader Trekking programme on fit India initiative***, to be held at Trikutta Bhawan, Katra, J & K from 17th to 21st Nov.2023.

Date: _____

**MEDICAL OFFICER
REGD. NO. & DESIGNATION**

**COUNTER SIGNED BY
DISTRICT COMMISSIONER (S/G) with Seal.**