

APPLICATION FORM FOR "NATIONAL LEVEL CUB/BULBUL UTSAV"

at National Youth Complex, Gadpuri from 19th to 23rd February, 2024.

Name of State			
BSG UID			
Name of Unit			
Name of Participant			
Father's Name			
Mother's Name			
Date of Birth	DD/MM/YYYY	Blood Group	
Permanent Address			
Mobile No.		Whatsapp No.	
E-Mail Id			
Educational Qualification			
Scouting/Guiding Qualification			
If any Medical Issues (<i>Please Describe</i>)			

Signature of the Applicant

DECLARATION

I am deputing my Son/Daughter______ in **NATIONAL LEVEL CUB/BULBUL UTSAV** with my consent. My Son/Daughter is physically and Medically fit. In case of any accident, illness or injury, manmade or natural, I will not hold the Bharat Scouts and Guides responsible at all.

> Signature of the Parent/Guardian Name: Relation: Contact No.

Recommended for admission in the **National Level Cub/Bulbul Utsav** to be held at National Youth Complex, Gadpuri, Palwal (Haryana) from 19th to 23rd February, 2024.

Signature of SOC (S/G)