



THE BHARAT SCOUTS AND GUIDES

NATIONAL HEADQUARTERS

RISK CERTIFICATE **(For Use of Applicants)**

It is certified that my Son/ Daughter/ Ward Mr. / Miss _____ is joining the National Level Trekking cum Environment Awareness Programme for Rovers, Rangers & Young Unit Leaders at Hemkunt Sahib Valley of Flowers with a base camp at Raiwala, Uttarakhand from 20-26 Sept., 2024 with my consent and the Organizer or the Bharat Scouts and Guides, National Headquarters shall not be held 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 trekking programme in the Himalaya. In case of any injury/illness, all required expenses will be borne by the Parent/Guardian. We certify that he/she is physically fit and participating in our self-risk and safety.

Name of Parent / Guardian

Signature of Parent / Guardian

Date

Relationship with Participant

Name

MEDICAL CERTIFICATE

1. Name

2. Address

3. Date of Birth

4. Unmarried

Married

5. Present / Past illness

6. Injuries / Operation Undergone and Present Condition

7. Any known Allergy to drugs / foodstuff

8. Blood Group

9. **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) Jaundice/Breathing Yes/No

(vi) Breathing issues Yes/No

(vii) 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 Trekking cum Environment Awareness Programme for Rovers and Rangers from 20th to 26th September 2024 at Raiwala, Hemkunt Sahib, Badrinath, Valley of Flowers, Uttarakhand.

Signature of Medical Officer

Regd. No.

Designation

COUNTER SIGNED BY

District Commissioner (S/G) with Seal