

## **Risk, Permission & Arrival Slip**

### **1. RISK CERTIFICATE**

This is certify that I, No..... Rank.....  
Name .....Father's Name Shri.....  
of..... Unit .....am  
volunteer to attend the..... Camp/Course being held at .....  
from..... to ..... at my own risk.

Date.....

Counter Signed by

(Father/Guardian)

Name in Full.....

Sign. Of Applicant

Address.....

### **2. PERMISSION ATTESTED BY NCC OFFICER/PRINCIPAL**

As the father/guardian has give the permission to his son/daughter/ward to attend the above NCC Camp. I therefore, also permit him/her for the same.

Date :

Sign of NCC Officer  
Seal

### **MEDICAL CERTIFICATE**

1. Certified that I have examined No. \_\_\_\_\_ Rank \_\_\_\_\_  
Name \_\_\_\_\_ Son/daughter/  
Ward of \_\_\_\_\_ of \_\_\_\_\_  
Institution and Unit \_\_\_\_\_ in accordance with  
the standard laid down in NCC Act & Rules and found him fit to undergo training of strenuous  
nature in \_\_\_\_\_ (Name of Camp/YEP) being conducted  
from \_\_\_\_\_ to \_\_\_\_\_

2. I also certify that the above mentioned Officers/Cadet has been inoculated/Vaccinated  
Against.  
(a) Typhoid (TAB)  
(b) Tetanus (TT)  
(c) Tuberculosis (BCG)  
(d) Hepatitis 'B'

#### **NOTE :-**

1. Ser 2 (d) is applicable for cadets proceeding on YEP only.
2. Strike out same if not applicable

Station :

Date :

Signature of Medical Officer  
(Name in Block Letters with)  
designation & Seal

### **4. ARRIVAL SLIP**

No..... Rank..... Name .....  
has been detailed to attend the..... Camp/Course being  
held at..... from ..... to.....

## **INDEMNITY CERTIFICATE**

In consideration of my being nominated at my request as Participation any Camps Course/Adventure Trg. activities like Mountaineering, Rock Climbing Trekking Hiking, Skiing, Cycling and Expedition and travelling. I undertake and agree that neither I nor executor of administration will make any claim against the Government of India or against any officer JCO/or Civilian MT Driver or against any person the service of Govt. of India, in respect of any loss or injury to the property or person (including injury resulting in death) which I suffer while or in consequence of my being participated and I understand that no compensation will be paid by the Govt. of India or any officer JCO/or Civilian MT Driver and in respect of any such loss of injury and I agreed so as to bind, my self, executor and administrator to indemnify the Govt. of India against any claim which may be any third party against them or any of them arising out any act on my part during or in connection of said travelling/journey.

Station .....	.....
Date.....	(Sign. of the Applicant)
Signed by Shri.....	No. ....
(In presence of)	Rank.....
	Name in (Block Letters).....
	.....
	Address.....

### **Witness**

1. Signature.....	
Name in Block Letters .....	.....
Address.....	
	Countersigned by
	(Father/Guardian).....
2. Signature.....	Name in Block Letters.....
Name in Block Letters.....	Address.....
Address.....	

## **ATTESTED BY THE COY COMMANDER / PRINCIPAL**

Station.....	Sign.....
Date.....	With Seal

## **DROWNING CERTIFICATE**

I, No..... Rank..... Name .....

..... attending Name type of Camp/Trak.....

..... At ..... know that there is deep water near the camp site and that the near to the water is OUT OF BOUND, if I go, there I shall do so entirely at my own risk.