

NCC CAMP DOCUMENTS (UNDERTAKING & CERTIFICATES)



FROM	(CAMP/ACTIVITY _TO CONDUC	CTED BY	(LOCATION)			
Regimental No		Rank				
Name of Cadet		Date of Birth				
Specimen Signature		NCC Year	II / III			
Mobile No		Aadhar No				
Bank Account No		Bank IFSC Code				
Father's Name		Father's Mobile No				
College / School		Institution Address				
Mobile No Principal		Mobile No of ANO				
COVID Vaccination	Date of First Dose : Date of Second Dose : Booster Dose Date :	Blood Group				
Unit		Meal Preference	VEG / NON VEG			
Type of Institution (tick the correct option)		State Govt / Govt Aided / Defence / Self Financing				
the camp / activity at above at my own risk.	d Risk Certificate. It is hereby cert the location and for the duration give which may result in loss, damage or suffer while journey or in consequent	n above, to be conducted injury to property of pe	ed by the NCC Unit mentioned erson (including injury resulting			
Date:	Name & Signature Cadet					
ponds and wells in the and I am forbidden to disciplinary action as	ecident Certificate. I have been in ecamp area or in places near the camp or go near any such water bodies. If the Camp Commandant deems appropring accidents and have understood	nstructed and am awar ap site or enroute to the I do so, it shall be at m opriate. I have been expl	re that all water bodies includicamp site are OUT OF BOUNI ny sole risk and shall be liable to			
Date:	Name & Signature Cadet _					
3. Indemnity B	ond.					

To, The President of India

In consideration of my being nominated either by the NCC authorities or at my own request as a participant in any NCC camp / activity (which may include Republic Day Camp or any other camp / activity in India or abroad), Course, Adventure Training (including Army, Navy and Air Wing activities, as the case may be) and while travelling (in domestic/international surface, air and water transport) and attending Youth Exchange Programmes abroad, I undertake and agree that neither I, nor my heirs, executors, administrators or other legal representatives will make any claim against the Government or against NCC authorities including Officers, JCOs, NCOs or their equivalents from Navy and Air Force, Civilians, MT drivers or against any other such person in the service of the Government, in respect of any loss or injury to property or person, including injury resulting in death, due to any reason whatsoever which I may suffer, while or in

consequence of my participation in the above activities and I understand that no compensation will be paid by the Government or NCC authorities including Officers, JCOs, NCOs or their equivalents from Navy and Air Force or Civilians or MT drivers in respect of any such loss or injury or death and I agree to bind myself, my heirs, executors, administrators and other legal representatives to indemnify the Government or NCC authorities including Officers, JCOs/NCOs or their equivalents from Navy and Air Force, Civilians or MT drivers or any person in the service of Government against any claim which may be from any third party against them arising out of any act or default on my part during or in connection with the said camps, courses, adventure training, travelling and while on Youth Exchange Programme or any other such NCC activities as may be organized from time to time within or outside the Union of India.

Dated this	day of	(month) 20_	at	(place).		
Sign of Cadet						
Sign of Witness 1		Address				
Sign of Witness 2		Address				
4. Parent's/Guard	ian's Consent. I,			(name), resident of (address), being the father /		
/ ward to participate in N Exchange Programmes) t international surface, air	CC camps / activitie hat may be conducted or water transport, ir ing so nominated by	s (including adve ed in India or abro the event of his the NCC authorit	nture trainir oad and for l / her being o ties. I also a	reby give my consent to my son / daughtering, adventure activities and Youth his / her travel by domestic or detailed for such camp / activity at his / gree to all terms and conditions of the activities.		
Name & Sign of Parent			N	Mobile No:		
bonafide student of my attend the NCC camp / a	College/School stud activity and can be s	ying in class pared for the dur	ation of suc	Certified that the above named Cadet is a He / She has been found fit to ch camp / activity. Also certified that this ease tick the correct option.)		
Date :		Signature and Stamp of Principal				
overleaf, in accordance v	vith the standards lai also certify that the	d down in NCC l Cadet has been	Rules and I inoculated(the cadet whose details have been given have found him / her <u>FIT</u> to undergo the COVID vaccination, Typhoid, Tetnaus & ng H1N1.		
Date:	Signatu	nature and stamp of Medical Officer				
properly kitted as per the to be taken against drow	e Adm and co-coord rning / accidents and	inating Instructio I explained to the	ns. I have e e cadets not	borne on strength of the unit and has been xplained the orders regarding precautions to go to locations / areas that have been has signed in my presence.		
Signature of Cadet		Signature and	stamp of the	e OC Unit		

Date

Station: