## DECLARATION ON ACCEPTANC FOR ENROLMENT

made.  2.   Bhramaramba. C	nswers I have given to the questions in this form se, and that I am willing to fulfil the engagement
3. 1 Bhamasamba. Cfurt	her promise that after enrollment, I will have no ion in the event of injury or death due to accident g and while on YEP or any other such NCC events service liability
Place:	
Date:	Signature Of The Applicant
1. I Solemnly declare that the a of them is false and that my son/ daugh 2. Bhamasanba. C.P. F. ward, I will have no claim on authorities	
Place:	Sinchana. N. C.
Date:	Signature of Parent/ Guardian (With Name)
	CERTIFICATE
Certified that the applicant conditions of enrollment.	his Parent/Guardian understand and agree to the
Place:	
Date of Enrollment(Unit Seal)	Signature of Enrolling Officer

•	
TO BE COMPLETED BY MEDICAL OFFIC	ER BEFORE ENROLMENT
I have examined (Name). Is have examined (Name). It has a subject to the example (Name). It has a subject t	
Cadet Corps.	- 10° - 10°
Place: Bengaluru Date: 07/10/2002	Signature
Date: 07/10/20022	Designation
TO BE USED FOR EXTENSION (	
(See Rule	is 13)
(See Rule Lagree to extend my enrolment for one year and I am	n willing to fulfill the engagement was
Place:	Signature Of Applicant
Date:	
Confirmed/Not of	confirmed
• Place:	
Date:	Signature Of Commanding
Officer	
i agree to extend my enrolment of my son/daug to fulfill the engagement made.	hter/ward for one year and I am willing
Place:	
Date:	Senchana. X. C.
	Signature Of Parent / Guardian
Confirmed/ Not	confirmed

Signature Of Head Master

- NOTE: This form will be retained in the school in which the unit is located.

Place:
Date from which extension starts.....

Appendix 'A' to DGNCC Letter No 19952/DGNCC/CWS dated 05 Feb.91

## NOMINATION FORM FOR MEMBERSHIP OF THE NCC CADETS WELFARE SOCIETY (TO BE RETAIND AT NCC GROUP HQ) SECTION-1

1. LCADET (Na	me in block letters)	BURAMARAMBA	son/ <u>Daughter</u>
of Shri (Name	in block letters)	TRAMESHWARLAL	ta student of class
College/School).	gana Evening	college With	on my enrollment with the  (Name of the  Membership of the NCC
Unit) & K.f. Cadets Welfare Son membership fee.	HR BM clety and hereby subscri	apply for be a sum of Rs.15/-(Rupo	Membership of the NCC ees Fifteen only) towards its

- 2. My Father/Mother/Guardian's occupation is Business man and the annual Income of my family from all sources is Rs. 5.00,000 per annum.
- 3. I understand that I shall be entitled to financial relief as determined by the Governing Baby/management committee of the above society in event of partial or permanent disablement sustained by me while participating in an organized NCC activity hereby accept that the decision of the Governing Body/managing committee with regard to quantum of be paid to paid in event of my partial/permanent disablement will be final and binding on me.
- 4. I hereby nominate the following person/persons who will receive finical assistance as the share indicate and as determined by Governing Body/managing committee of the above society, which will be final and binding on the following persons (S) in the event of my death while participant in an organized NCC activity:-

SI No	Name of the Nominee/ (In block letters)	Age	Relationship With the cadet	Permanent address of the Nominee	Percentage of financial assistance payable
01.	STNCHANA . N.C	23	Sister	Nasaynapusa Affanapusa (Ta) Chik Kapuanglum (D)	80 %
03	SAHAMA . N.C	20	Sixter	Nagaynapura Affany, ne a (Ta) Chikamandura	20%

(To be filled by the Cadet In own hand writing)

<ol><li>My membership in the We been enrolled.</li></ol>	litare Society and the Nomination Form will be valid only till such time i
	St A
Dale: ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Place: waxaan in	(Full Signature of the Cadet) Section-II
Date:	
Place:	Signature of PTO/Head of
	Section-III
I am willing to allow m become a member of NCC Cade the Society I also approve of the	y son/daughter/ward name
Date:	Full signature of the father/mother/guardian
Winess  (Signature)  (Signature)  May an arrivare, A jay  Full hame and address or office  Seal of the witness	Seal of the witness
Note: The witnesses should be either Go	zetted officer, Head of Institution/NCC part time Officer/ Sopranos/Village Head
•	Section-V (To be filled in by the NCC Unit)
Date of dispatch of the Nomination form to Gr Note: The Nomination form will be printed on	pop HQboth sides of a single leaf.
ر ساست ساست که میکند میکند نواند بیشتر بیشتر بیشتر بیشتر میکند. د	Section-IV
Received a sum of Rs.15/- (Rupe the NCC Cadets Welfare Society	es Fifteen Only) as one time subscriber and enrolled as a member of during the cadetship in the Junior/Senior Davison/Wing.
Date:	Signature of the CO Unit with seal

## INDEMNITY BOND

To

The President of India

In consideration of my being nominated either by the NCC authorities or my own request as a participant in any NCC camp (which includes Republic Day Camp and independence Day Camp Delhi) Course, Adventure Training (including Army, Navy & Air Wing activities, as the case may be and while traveling (in domestic/international surface, air and water transport) and afterding Your Exchange Programmes abroad, I undertake and agree that neither I, nor my executors or administrators or other legal representatives will make any claim against the Government or against NGC authorities including officers, JCO's/NCOs or their equivalents from Navy and Air Force or lans MT drivers or against any other such 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 accordes and I understand that no compensation will be paid by the Government or NCC authorities roughly officers, JCO's/NCOs or their equivalents from Navy and Air force or civilian MT drivers or respect of any such loss or injury and lagree as to bind myself, my executors and administrators and other legal representatives to indemnify the Government or NCC authorities including officers. JCO s NCOs or their equivalents from Navy and Air Force, civilians MT Drivers or any person in the service of Government against any claim which may be from any third party against them or any of them are no out of any act of default on my part during or in connection which the said camps, courses acventure training traveling and while on Youth Exchange Programme or any other such NCC activities as Ta. be organized from time to time within or outside the Union of India.

	Signature of Applicant
	Regt No
	Name Bhramaramba. C.P
	UnivGroup 8 KAR BN".  Rayplance B' Group
Witness	
1. Signature Sinthoma. N. C Name - Sinchana. N. C Name - Nasayana pura. Ajjampu	ua (ta)
Name - Sinchana . N. C Name - Sinchana . N. C Address - Narayana pura . Ajjanyu chekk Andryluru (0)	Signature of Parent/Guardian Name Hawkitha. D.
G. M. Q. M.	Signature of Parent/Guardian
Name - Pahana . N.C	Name Harritatha D.
Maine - Bahana. N. C Address - Marayamofrica, Affrontones (19) Charamanghiru (D)	Address flat No. 106. Tirunala Towers Boxuswattingger. Mondhishall Andrapradesh.
Chamanghan	Andrapradesh,
Date:	140-00
1000 - 1000 -	