| Address: | |
|------------|---|
| Purbachal, | |
| A.P. Nagar | |
| Sonarpur, | |
| Kolkata | |
| 700150 | |
| | 1 |

For official Use only

FORM No.:



E – Mail: sonarpur.arohi@gmail.com

Contact No.: 9830746857

Website:

www.sonarpurarohi.com www.arohiemag.com

SONARPUR AROHI

A Club of Expedition

(Registered Under Govt. Of West Bengal & Affiliated To Indian Mountaineering Foundation, New Delhi)

Photo

APPLICATION FORM ROCK CLIMBING, NATURE STUDY & CAMPING COURSE

(TO BE FILLED OR TYPED IN BLOCK LETTERS)

NOTE: INCOMPLETE FORMS WILL NOT BE ACCEPTED

| 1. Name: | | | |
|--|---|--|--|
| 2. Date of Birth: | 3. Blood Group: | | |
| 4. Occupation: | | | |
| 5. For Student (Name of School & | & Class): | | |
| 6. Academic Qualification: | | TA A | |
| 7. Permanent Address: | | | |
| Pin: | Aadhar No.: | 8. Mobile | No.: |
| 9. Mail: | 10. Nationality: | <mark>1</mark> 1. Ge <mark>nd</mark> er: Male 🛭 | Female Trans |
| 12. Adventure Experience: | 7-4 | | |
| | | 13. | |
| 14. BASIC ADVANCE | CAMPING OBSERVER | ⊃ G <mark>UIDE & S</mark> URVI <mark>V</mark> AL | □ OFFICIAL □ (<i>TICK</i>) |
| 15. Fees Total Amt | Advance | Due | |
| 16. Introduced By (With Ph. No. | o.): | | |
| Telephone with Address and ne | xt to Kin, Parents / Guardian (in | case of any accident) | |
| | | | |
| Address: | | | |
| | PIN: | | |
| Mobile No.: | Mail ID: | M W 6 7 5 700 | |
| Self / Guardian declaration: | | | |
| course and have fully unders mentally fit for the above ver case of any accident or injury | ulations of Sonarpur Arohi relationd of the meaning and signiture. The above declaration had of any form in due course, to partially responsible. In case of | ficance of the same. I / as been made by me, wh he organization or any o | He / She is medically and nich is true and correct. In f its members will not be |
| Date: | Signature of Ap | Signature of Applicant: | |
| Date: | Signature of Guardian: | | |