

APPLICATION FORM

Tele : 223580, 222123
: 223344
STD Code : 01374



Success Lies In Courage

Web : www.nimindia.net
e-mail : nimutk2004@gmail.com
Fax : (01374)-223344
WhatsApp : 7060 717 717

NEHRU INSTITUTE OF MOUNTAINEERING

UTTARKASHI - 249193 INDIA

(TO BE FILLED OR TYPED IN BLOCK LETTERS)

NOTE : INCOMPLETE FORMS WILL NOT BE ACCEPTED

Affix Recent
Passport Size
Photograph

1. Name _____
2. Date of Birth ___ / ___ / ___ (DD/MM/YYYY) (in words) _____
3. Father's Name _____
4. Adhaar No _____
5. Occupation _____
6. Permanent Address _____
Pin : _____
Phone Number (a) Mb _____ (b) Tel (with STD) _____
E-mail _____
7. Next of kin/Parent/Guardian details
Name _____ Relation _____
Address _____
Pin : _____
Phone Number (a) Mb _____ (b) Tel (with STD) _____
8. Course to be attended- BMC/AMC/S&R/MOI/Adventure
Option (I) Ser No.....Commencing on.....
Option (II) Ser No.....Commencing on.....
9. Vegetarian or Non-Vegetarian. _____
10. Training fee Rs _____ is enclosed vide Bank Draft No./NEFT _____ (Atch Copy) dated _____
11. Nationality _____
I have read the rules and regulations of NEHRU INSTITUTE OF MOUNTAINEERING, UTTARKASHI relating to the courses of training in Mountaineering/Adventure/Search & Rescue/ Method of Instruction/Skiing/ Sports Climbing and have fully understood the meaning and significance of the same. I declare that I am physically and medically fit to undergo the course I am applying for. The above entries have been made by me and they are true and correct.
Date _____
Place _____ Signature of Applicant _____
12. I hereby certify that all the entries are correct in every respect. In case of deaths, accident or injury of any form during the training, the Institute or any of its staff will not be held in any manner wholly/partially responsible.
Signature _____ (Parent / Guardian)
Date _____ Name _____
Place _____ Relationship _____