APPLICATION FORM

Tele : 222123 STD Code : 01374

Training Office: 7060 717 717



Web : www.nimindia.net

e-mail : nimutk2004@gmail.com

Principal : 9997 254 854 WhatsApp : 7060 717 717

Success Lies In Courage

NEHRU INSTITUTE OF MOUNTAINEERING

UTTARKASHI - 249193 INDIA (TO BE FILLED OR TYPED IN BLOCK LETTERS) Affix Recent

Passport Size

NOTE : INCOMPLETE FORMS WILL NOT BE ACCEPTED	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	
NameRelation	
Address	_
Pin :	
Phone Number (a) Mb(b) Tel (with STD)	
8. Course to be attended- BMC/AMC/S&R/MOI/Adventure	
Option (I) Ser NoCommencing on	
Option (II) Ser NoCommencing on	
9. Vegetarian or Non-Vegetarian	
10. Training fee Rsis enclosed vide Bank Draft No./NEFT(Attcl	h Copy) dated
11. Nationality	
I have read the rules and regulations of NEHRU INSTITUTE OF MOUNTAINEERING, to the courses of training in Mountaineering/Adventure/Search & Rescue/ Method of Sports Climbing and have fully understood the meaning and significance of the samphysically and medically fit to undergo the course I am applying for. The above entry me and they are true and correct. Date	of Instruction/Skiing/ ne. I declare that I am
Place Signature of Applicant _	
12. I hereby certify that all the entries are correct in every respect. In case of deaths, any form during the training, the Institute or any of its staff will not be held in an wholly/partially responsible.	, accident or injury of y manner
Signature	(Parent / Guardian)
Date Name	
Place Relationship	