

# RISK / VOLUNTEERING CERTIFICATE

This is to certify that I No. \_\_\_\_\_ Rank \_\_\_\_\_  
Name \_\_\_\_\_ of \_\_\_\_\_  
Coy / Troop No. \_\_\_\_\_ of 1 MP CTR NCC, Bhopal, I am volunteer to attend / participate  
in \_\_\_\_\_ being held at \_\_\_\_\_ from \_\_\_\_\_  
to \_\_\_\_\_

Signature of Father / Guardian \_\_\_\_\_

Signature of Cadet \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

## COUNTER-SIGNED BY THE PRINCIPAL OUT OF BOUND CERTIFICATE

Institution \_\_\_\_\_ Regtl. No. \_\_\_\_\_  
Rank \_\_\_\_\_ Name \_\_\_\_\_ of No. \_\_\_\_\_ Coy/Troop of 1 MP COMPO  
TECH REGT NCC, BHOPAL know that there in deep water rear the camp site, and that the area of the  
water is out of Bounds, if I go there I shall do entirely of my own risk.

Place \_\_\_\_\_

Date \_\_\_\_\_

(Signature of the Cadet) \_\_\_\_\_

## MEDICAL FITNESS CERTIFICATE

This is certify that I have examined No. \_\_\_\_\_  
Rank \_\_\_\_\_ Name \_\_\_\_\_ of \_\_\_\_\_  
1MP CTR NCC , Bhopal in accordance with NCC Act and Rules, Appendix 'A' and found him fit/unfit to  
attend \_\_\_\_\_ being held at \_\_\_\_\_  
from \_\_\_\_\_ to \_\_\_\_\_

He has been vaccinated / innoculated.

Station: \_\_\_\_\_

Dated : \_\_\_\_\_

Signature of the Medical Officer with seal \_\_\_\_\_

## SECURITY CERTIFICATE

I certify that I am not in possession of any type of private arms and ammunition or any sort of  
sharp weapons with me.

Signature of Cadet \_\_\_\_\_

Place \_\_\_\_\_

Dated \_\_\_\_\_

Regtl No. \_\_\_\_\_

Institution \_\_\_\_\_

# FORM OF INDEMNITY FOR NCC OFFICERS / CADET OF ARMY WING NCC

To,  
The President of India

In Consideration of my being nominated at my request to undergo all types of training and also participate in any Camp/Courses. Adventure Training etc. In/Out side NCC and travelling. I undertake and agree that neither I nor my Executor nor administrator will take any claim against the Government of India or against any Officer, JCO or of Armed Forces / Civilian MT Driver or against any person in the service of Govt. of India in respect of any losses injury to the property or person (including injury resulting in death) which I may suffer while or in consequence or my being in training participation in any Camp/Course/Adventure Training Activities in/Outside NCC and travelling. And I undertake that no compensation will be paid by the Govt. of India or any Officer, JCO or of the Armed Forces / Civilian MT Driver respect of any such loss or indemnity the Govt. of India any Officer, JCO or Armed Forces/Civilian MT Driver (including injury resulting in death) and I agree that administrator and any person in the services of the Govt. of India against any claim. This may be made by any third party against them or any of them arising out of any act or default on my part during or in connection of such training Camp/Course/Adventure Training etc. and journey to Road/Sea/River and Flight.

The Govt. has agreed to bear the stamp duty on this document signed by the applicant in the presence of

WITNESS NO. 1

Signature of Applicant & Address

Signature \_\_\_\_\_  
Date \_\_\_\_\_  
Name \_\_\_\_\_  
Address \_\_\_\_\_

Regtl. No. \_\_\_\_\_ Year \_\_\_\_\_  
Institution \_\_\_\_\_  
Place \_\_\_\_\_

WITNESS NO. 2

Signature \_\_\_\_\_  
Date \_\_\_\_\_  
Name \_\_\_\_\_  
Address \_\_\_\_\_

Counter Signature of Father / Guardign  
(in Block Capital)

COUNTER SIGNATURE OF COY/TROOP COMMANDER