



**NATIONAL CADET CORPS**  
**MAHARASHTRA**  
**IDEMNITY BOND**

To,

The President of India

In consideration of my being nominated either by the NCC authorities or at my own request as participant in any NCC Camp (which includes Republic Day Camp and Independence Day Camp in Delhi) , Course , Adventure Training including Army, Navy and Air wing activities, (as the case may be) and while travelling (in domestic/international surface, air and water transport ) and attending Youth Exchange Programmers 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 NCC authorities including Officers, JCOs / NCOs or their equivalents from Navy and Air Force, Civilians , MT drivers or against any other such person in the service of the Government , in respect of any loss or injury to the property or person, including injury resulting in death, due to any reasons whatsoever which I may suffer, while or in consequence of my participation in the above activities and I understand that no compensation will be paid by the Government or NCC authorities including Officers, JCOs or NCOs or their equivalents from Navy and Air Force or Civilian MT drivers in respect of any such loss or injury and I agree as to bind myself, my executors and administrators and other legal representatives to indemnify the Government or NCC authorities including Officers, JCOs or NCOs or their equivalents from Navy and Air Force , Civilian , 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 arising out of any act or default on my part during or in connection with the said camps, courses, adventure training, travelling and while on Youth Exchange Programme or any other such NCC activities as may be organised from time to time within or outside the Union of India.

(Signature of Applicant)

Name:

Witnesses:-

1. Signature: \_\_\_\_\_  
Name:  
Address:

(Signature of Parent/Guardian)

Name:  
Vill/PO: \_\_\_\_\_  
Tehsil/Dist:

2. Signature: \_\_\_\_\_  
Name:  
Address:

**COUNTER SIGNATURE OF OC UNIT**

Place:

Date:



**NATIONAL CADET CORPS**  
**MAHARASHTRA**

**PARENT'S GUARDIAN'S CONSENT**

In consideration of my / my son / daughter / ward (Name) being nominated by the NCC authorities or at my own request as a participant in any NCC camp (Which includes Republic Day camp (Which includes Republic Day Camp and any other Camp and any other Camp in Delhi) Course. Adventure Training (including Army, Navy & Air wing activities, as the case may be) and while travelling (in domestic/international surface, air and water transport) and attending Youth Exchange Programmes abroad, I am willing to send my ward for the camp and agree to all terms and conditions of NCC organization.

(Signature of Parent/Guardian)

Station:

At/Post/Village: \_\_\_\_\_

Date :

Tehsil / Dist: \_\_\_\_\_

**COUNTER SIGNATURE OF OC UNIT**

Place:

Date:



**NATIONAL CADET CORPS**  
**MAHARASHTRA**  
**WILLINGNESS CERTIFICATE**

1. No. ....Rank .....Name .....  
of .....College / School , am willing  
and volunteer to participate in **CATC-**\_\_\_\_\_ to be held at \_\_\_\_\_  
from .....to .....

**Signature of the Cadet**

Signature of Associate NCC Officer

Date:

Date:

**CERTIFICATE FROM HEAD OF THE INSTITUTION**

1. It is certified that No. ....Rank .....  
Name .....is  
a student of .....class which is following the 2 Years / 3 Years Degree/  
4 years Degree course pattern.
2. This Cadet is found suitable for attending the **CATC-**\_\_\_\_\_ at \_\_\_\_\_.

**Institution**

**Signature**

**Seal**

**Date:**

**COUNTER SIGNATURE OF CO UNIT**

Date :

Place :



**NATIONAL CADET CORPS**  
**MAHARASHTRA**

**RISK CERTIFICATE**

1. It is certified that I agree to detail my son / daughter Shri / Kum .....  
..... for **CATC-**\_\_\_\_\_ at \_\_\_\_\_  
from ..... to .....

2. I further declare that my son / daughter will participate in the training camp at my own risk and no compensation will be paid to me in case of any accident / injury or loss to property or person. I further declare that in the event of injury /death due to accident / drowning, due to whatever cause, NCC Directorate Central, New Delhi, or the staff or other candidates undergoing Training will not be liable to pay any compensation.

Signature of Parent / Guardian

Signature of the Cadet

Name:.....

Date :.....

**COUNTER SIGNATURE OF CO UNIT**

Date :

Place :



**NATIONAL CADET CORPS**  
**MAHARASHTRA**

**ACCIDENT / DROWNING CERTIFICATE**

I ..... Son/Daughter of.....  
.....Address.....  
.....wish to attend the  
**CATC-**..... being conducted at ..... from.....  
to ..... at my own risk. In the event of my sustaining any injury/death due to  
accident / drowning due to my fault or anyone else's fault during the conduct of training / Camp,  
I give this undertaking that I will not be entitled for any compensation.

Signature of Parent / Guardian

Signature of Candidate

Date :

Date :

Signature of the Associate NCC Officer

Date :

**ATTESTED BY HEAD OF THE INSTITUTION**

Date :

(Signature and Stamp)

Place :

**COUNTER SIGNATURE OF CO UNIT**

Date :

Place :



**NATIONAL CADET CORPS**  
**MAHARASHTRA**

**MEDICAL CERTIFICATE**

1. Certified that I have examined No.....Rank .....

Name .....

Son/daughter/ward of.....of

..... institution and in NCC Act & Rules

and found him fit to undergo training of strenuous nature in .....

(Name of camp /YEP) being conducted from .....to .....

2. I also Certify that the above mentioned Officer / cadet has been inoculated / vaccinated against:-

- (a) Typhoid (TAB)
- (b) Tetanus (IT)
- (c) Tuberculosis (BCG)
- (d) Hepatitis 'B'

Note :

- 1. Ser 2 (d) is applicable for cadets proceeding on YEP only.
- 2. Strike out same if not applicable.

Station:

Signature of Medical Officer

Date:

Name  
Designation  
(Office Seal)