



West Bengal Mountaineering & Adventure Sports Foundation (WBMASF)

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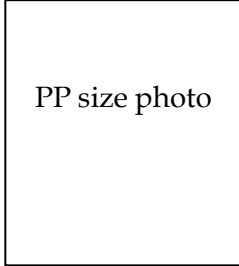
Directorate of Youth Services

Government of West Bengal

**Application Form**

**Last Date - 14<sup>th</sup> December, 2023**

Name (IN BLOCK LETTERS):.....  
Father's / Mother's Name: .....  
\*Residential Address (Attached photocopy): .....  
.....PIN .....  
Telephone No: ..... Blood Group .....  
E-mail : ..... \*Date of birth: (Attached photocopy).....  
Next of kin (Name, Relation & contact no.):.....



Occupation : ..... Academic Qualification: .....  
School/College/Office/Association/ Club represented & Address:.....  
.....  
(With name of contact person & contact no., e-mail etc.) .....

Course to be Attended : Basic / Advance / MOI / Search & Rescue:.....  
Time preference (if any) : (1)..... (2).....  
\*Mountaineering & Allied Qualification (Attached photocopy):

S. No.	Course	Institute/ Organization	Year	Grading	Remarks
(a)					
(b)					
(c)					

WBMASF scholarship availed earlier (if any): .....  
\*Gross Family Income (Attached certificate): Rs. ....  
Preference of Selection venue (Kolkata/Durgapur/Siliguri): .....

I.....S/o, D/o ..... hereby volunteer to attend WBMASF sponsored Mountaineering Course at H.M.I. and for that purpose, I'm willing to participate the physical selection test. In case of any injury (including fatality) arising on account of any unforeseen accident or mishap during the test or during training undertaken in conjunction with the whole process, no claim, whatsoever, would be raised against the organizer.

The above entries & declaration have made by me in sound health & mind and are true & correct.

Date: ..... (Signature of the applicant)

I examined Shri/Smt. ....and found him/her medically fit to undergo physical test for selection to the above mentioned Mountaineering course.

Date:..... (Signature of Doctor with Regn.No.)

**\*Self-attested photocopies to be submitted as proof**