

Registration Form

 Enrollment No.

Photo

 Name & Period of Camp:

Sr. No.	Name of Son / Daughter	Date of Birth	Age	M/F	Blood Group	Height	Weight	Hobbies	Tea / Coffee / Milk / Bornvita
1.									
2.									

Residential Postal Address with Landmark:

 Pin-
Contact Details of Parents: If Participant is Minor

Father					Mother				
Mobile	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>
Email Id:	<input style="width: 80%; height: 20px;" type="text"/>				<input style="width: 80%; height: 20px;" type="text"/>				
Email Id of Participant:	<input style="width: 95%; height: 20px;" type="text"/>								
In case of emergency, we should contact (other than Parents):									

Personal Medicines: (Any instructions / Dosages)

Allergies: (Sulpha Drugs / Antibiotics OR Temperament, if any)

Stage Performance: (Dance, Singing, Any musical instrument, Drama, etc)

Name of School & Address:

1.	<input style="width: 95%; height: 20px;" type="text"/>	Address: <input style="width: 95%; height: 20px;" type="text"/>
2.	<input style="width: 95%; height: 20px;" type="text"/>	Address: <input style="width: 95%; height: 20px;" type="text"/>

Preference (If Applicable)

 Onwards travel: Upgrade to 3AC 2AC Air

 Return travel: Upgrade to 3AC 2AC Air

 Meals (Applicable if mentioned in itinerary) Veg. Non-Veg. Eggatarian

 Accommodation: Single Occupancy Separate Tent Twin Sharing

 I hereby Agree to Receive **SMS ALERT** being of any nature - Promotional / Transactional. In Case if I want to unsubscribe then I will write an Email for the same. Please note that this information will be used to update you about Tours as well as for our future promotions. However Explorers will not sell or share this data with any third party for any commercial use by them.

Sign of Participant
Sign of Authority

(Parent / Guardian to sign if the Applicant is a minor)

Explorers®


Declaration

I Have read & I am Fully aware of all the Rules & Regulations related to Cancellation Policy, Refund, Rules during the Trek / Adventure Activity, Detailed Itinerary, Transportation, Accommodation & Food provided during the Tour. I / my Son / Daughter agreed to follow the instructions given by the organizers during any type of activity & Having agreed to take part in the above mentioned Trek / Activity organized by **Explorers®**, do solemnly declare that I / my Son / Daughter doing so at my / his / her own risk & responsibility. I / my Son / Daughter further declare that any person authorized by the above mentioned organization on their behalf shall not, in any way, be liable to me or my dependents, legal heirs, successors or to any other person for any loss, damage, disability or injury sustained by me or for death resulting from my participation in the above mentioned Trek / Activity. The aforesaid organization & any person authorized by them shall not be liable to pay any compensation, by whatever name called, to me or to my dependents, legal heirs, successors or to any other person. I / my Son / Daughter declare that I / he / she have not been in contact with any infectious disease for the past one month and that I am keeping good health. Also any damage/Loss of vehicle, rooms, equipments provided by Explorers or any other things knowingly or unknowingly will be recovered from the concern child / parents / participant. It is assumed that you have accepted all the terms, conditions and undertakings, when you enroll for an event. I / my Son / Daughter may be allotted one of the following dates in order of preference and condition sent to me.

I / my Son / Daughter hereby authorize Explorers to issue Railway / Air Tickets for me / my ward.

Batch No..... Date..... Place.....

Sign of Participant

Sign of Authority

(Parent / Guardian to sign if the Applicant is a minor)

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FOR OFFICE USE ONLY

Receipt No:

Period of Camp: _____

Departure Date, Time & Location: _____

Arrival, Time & Location: _____

Discount: Early Bird Discount Group Discount Full Payment Discount Repeater Discount*

Payment Details: **Total Amount** : Rs. _____

(-) Advance Amount : Rs. _____

(-) Early / Group Discount : Rs. _____

(-) Full Payment Discount : Rs. _____

(-) Repeater Discount : Rs. _____

Balance Amount : Rs. _____

Reservation In charge Name & Signature: _____

