



NATIONAL ADVENTURE SPORTS ACADEMY

ENROLLMENT FORM

National Adventure Sports Academy (Regd.)

AN ISO 9001:2008 CERTIFIED ORGANIZATION

Mob.: 09050003101, 09215999101

E-mail: nasaadventure@yahoo.com, Website: www.nasaadventures.com

1. LAST NAME

FIRST NAME

2. FATHER'S NAME

3. PERMANENT ADD.

4. MAILING ADD.

5. CONTACT NO.

6. DATE OF BIRTH: 7. SEX MALE FEMALE

8. EDUCATION

9. OCCUPATION You are.....if employed

Student Employed Other

Affix Two
Passport size
Photograph

RISK CONDITION

It is certified that I agree to detail my son/daughter/ward/Mr./Myself for..... course at my own risk and no compensation will be paid to me in case of accident, and I will not hold the Academy or its staff wholly or partially responsible for any mishappening.

Date:

Signature of Parent/Guardian/Applicant:

COUNTERSIGNED

Note:- The risk certificate for applicants below 18 years of age is to be signed by a parent/guardian, and for others by the applicant himself/herself and countersigned by the sponsoring authority.

Yes, I would like to enroll as a volunteer at your Academy. I hereby pledge to volunteer for the protection of adventure sports, and in the interest of the Academy, I declare that the information included in this application is true and correct. I have read the terms and conditions, and they are acceptable.

Date: _____

Signature of Applicant: _____

Place: _____

Signature of Guardian

(In case of a minor): _____