

# Summer Camp 2022

Organized By

**IPS GROUP OF COLLEGES**

In Association With



**JCI, GWALIOR**



Dates :

**9<sup>th</sup> May to  
10<sup>th</sup> June 2022**

Camp Timing  
6:00 am to 9:00 am

Registration  
Fee  
**2500/-**

## Camp Activities ( Choose any Three)

- Skating
- Cricket
- Table Tennis
- Volley ball
- Swimming
- Football
- Yoga & Aerobics
- Shooting
- Basketball
- Badminton

**Free**  
Conveyance  
Facillity

**Free**  
Fitness Classes  
& Yoga  
For Parents

Venue : IPS Group of Colleges, Shivpuri Link Road, Gwalior

**Forms Available**

[www.ipsgwalior.org](http://www.ipsgwalior.org), Master Sports, Monica Galaxy

Contact : Dr. Vijay Moghe- 9039158258, Mr. Bhupendra Singh 9981079199 Dr. Devesh Tiwari 9997936058, Mr. Vinay 88219 66600



IPS, Gwalior

# Summer Camp 2022

(Organized by IPS Group of Colleges, Shivpuri Link Road, Gwalior)

In association with

**JCI, Gwalior**

## Registration Form

(9<sup>th</sup> May to 10<sup>th</sup> June 2022)

{Camp Timing 6.00 am to 9.00 am}

Please Submit  
One Extra  
Photo for  
Identity Card

- Name (in capital letters) .....
- Father's/Mother's Name .....
- Age and Sex (minimum 5 years) .....
- Address with Contact No .....

5. Please mention, if you are suffering from any chronic disease viz., high blood pressure, Asthma, blood sugars, allergy(chlorine)etc.

6. Membership requested for (please write Yes/No in given box, **any three**)

Swimming		Cricket		Table Tennis		Skating	
Basketball		Football		Yoga & Aerobics Dance		Volleyball	
Shooting		Badminton					

- Entry Fee @ 2500/- for 1 (One) month including conveyance.
- Registration form and fees should be submitted at IPS College campus before the date of opening of the Camp on 9th May 2022.
- For any queries regarding camp or conveyance please contact following persons.

<b>Dr. Vijay Moghe</b>	<b>Dr. Devesh Tiwari</b>	<b>Mr. Bhupendra Singh</b>
(Camp In-Charge)	(Coordinator)	(Coordinator)
<b>9039158258</b>	<b>9997936058</b>	<b>9981079199</b>

I Sh./Smt./Ku..... Undertake to abide by the rules and regulations of Indoor stadium and swimming pool as prescribed by the IPS College administration from time to time. I also commit myself to pay the prescribed membership fees as fixed.

Signature of Applicant.....

Signature of Parents .....

(For more queries and to download Application Form visit [www.ipsgwalior.org](http://www.ipsgwalior.org))

### FOR OFFICE USE ONLY

Membership fee of Sh./Smt./Ku..... has been received, his/her application for membership may be accepted effective...../...../.....

Date:

Authorized Signatory.....

### BUS ROUTE AND TIME SCHEDULE

**Route No 1:** {5.00 am Starting Time} Maharaja Complex--- DD Nagar (Main Gate) --- Gola Ka Mandir---7 No. Chauraha---Baradari Chauraha---Thatipur Chauraha---Govindpuri---Madhonagar---Chandrawadi Ka naka---Vikki Factory---IPS College {Arriving at IPS: 6:00 am}  
[ Bus no.MP-07-P-1028, Driver Name Mr. Trilok, Mob. 9826113577]

**Route No 2:** {5.00 am Starting Time} Hajira --R.P.Colony---Gandhi Naga---Padav---SKV Circle ---Laxmi bai Murti--- Phoolbagh---Nadigate---Inderganj--- Hospital Road --- Dal Bazar Tiraha---Naya Bazar Choraha---KRG College---SAF ground road---Gudi Guda Ka Naka--- IPS College {Arriving at IPS: 6:00 am}  
[ Bus no. MP- 07 -F-1151, Driver Name Mr. Kalli, Mob. 9425129481]

**Route No 3:** {5.00 am Starting Time} Shabd Pratap Aashram --- Koteswar --- Jail Road Tiraha---Hanuman Chauraha---Nai Sadak---Patankar---Bada---Roxy Pul---Eidgaha---Murgi Farm--- IPS College {Arriving at IPS: 6:00 am}  
[ Bus no. MP-07-F- 715, Driver Name Mr. Kalli, Mob. 9425129481]

**DEPARTURE TIME FOR BUSES 9:10 AM**



इंस्टीट्यूट ऑफ प्रोफेशनल स्टडीज, ग्वालियर  
बेला की बावडी तिराहा, शिवपुरी लिंक रोड, ग्वालियर

चिकित्सा प्रमाण पत्र

प्रमाणित किया जाता है कि श्री/श्रीमती/कु. .... का स्वास्थ्य परीक्षण मेरे द्वारा किया गया है ये किसी भी प्रकार जैसे अस्थमा, मिर्गी, एलर्जी (क्लोरीन) या चर्म रोग से पीड़ित नहीं है। आई.पी.एस. के तरण ताल में तैरने के लिये इनका स्वास्थ्य उपयुक्त है।

दिनांक .....

चिकित्सक के हस्ताक्षर

क्रमांक .....

पदमुद्रा .....

शपथ – पत्र

मैं ..... शपथपूर्वक कथन करता हूँ कि मेरे पुत्र/पुत्री के चिकित्सा प्रमाण पत्र में दी गई जानकारी मेरे संज्ञान के अनुसार सही है। समर कैम्प में किसी भी प्रकार की दुर्घटना के लिये आई.पी.एस. ग्रुप ऑफ कॉलेज किसी भी प्रकार से जिम्मेदार नहीं होगा।

दिनांक .....

हस्ताक्षर अभिभावक

Note:-

- ✓ All the participant of above twelve years should be vaccinated and attach vaccination certificate.
- ✓ Students should follow Covid-19 protocol.