

# Summer Camp 2017

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

## APPLICATION FORM

(1<sup>st</sup> May to 1<sup>st</sup> June 2017)

{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 .....
- Please mention, if you are suffering from any chronic disease viz., high blood pressure, Asthma, blood sugars etc. ....
- Membership requested for (please write Yes/No in given box, **any three**)

Swimming		Cricket		Table Tennis		<b>Adventure Sports for 7 Days @ 500/-</b>
Basketball		Football		Aerobics Dance		
Shooting		Badminton		Yoga		

- Entry Fee @ 1800/- for 1 (One) month including conveyance.
- Entry of Parents in Summer camp are free.
- Registration form and fees should be submitted at IPS College campus before the date of opening of the Camp on 1<sup>st</sup> May 2017.
- For any queries regarding camp or conveyance please contact following persons.

<b>Dr. Vijay Moghe</b>	<b>Dr. Diwakar Pal</b>	<b>Mr. Bhartendu Sharma</b>
(Camp In-Charge)	(Coordinator)	(Coordinator)
<b>9039158258</b>	<b>9977022271</b>	<b>8889978278</b>

I Sh./Smt./Ku..... Undertake to abide by the rules and regulations of Indoor stadium and swimming pool 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. 7495, Driver Name Mr. N P Shrivastava, Mob. 9039807061** ]

**Route No 2:** {5.00 am Starting Time} Hajira --R.P.Colony---Padav---SKV Circle ---Laxmi bai Murti--- Phoolbagh---Nadigate---Inderganj--- Chamber of Commerce --- Dal Bazar---Naya Bazar---KRG---SAF ground road---IPS College {Arriving at IPS: 6:00 am}  
[ **Bus no. 1253, Driver Name Mr. Vijay Chauhanl , Mob.9584790464** ]

**Route No 3:** {5.00 am Starting Time} Shabd Pratap Aashram--- Koteswar ---Bahodapur---Hanuman Chauraha---Nai Sadak---Patankar---Bada---Roxy Pul---Eidgaha---Murgifarm  
IPS College {Arriving at IPS: 6:00 am}  
[ **Bus no. 1685, Driver Name Mr. Hemant Bajpayee , Mob. 9425129481** ]

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

# इंस्टीट्यूट ऑफ प्रोफेशनल स्टडीज, 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 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**