



# INDIAN ADVENTURE FOUNDATION

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(BE FILLED IN CAPITAL LETTERS)

NOTE :- Incomplete Format Will Be Not Accepted

Camp / Event/Course \_\_\_\_\_ Year \_\_\_\_\_

Venue \_\_\_\_\_

Date \_\_\_\_\_ to \_\_\_\_\_

In charge \_\_\_\_\_ Male /Female \_\_\_\_\_ Designation \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_ pin \_\_\_\_\_

Mobile \_\_\_\_\_ E-mail \_\_\_\_\_

## PARTICIPANT DETAILS

1:- Name of Group/Institute /School/College \_\_\_\_\_

2:- District \_\_\_\_\_ pin \_\_\_\_\_

3:-State \_\_\_\_\_

4 :- No. of Student \_\_\_\_\_ No. of Teachers/Leaders \_\_\_\_\_

5:- Total no \_\_\_\_\_

6:- By Bus/Train/Taxi \_\_\_\_\_ Date \_\_\_\_\_ Arrival Time \_\_\_\_\_ Date \_\_\_\_\_ Departure Time \_\_\_\_\_

Signature of Incharge

Name :-

Designation :-

Mobile No. :-

**INDIAN ADVENTURE INSTITUTE (YPAHS) Coming Soon**

UNDER RUN BY (IAF)