



**CHANDIGARH ADMINISTRATION  
SPORTS DEPARTMENT**

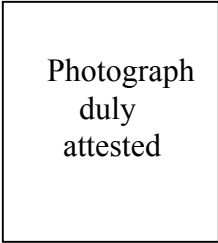


e-JANSAMPARK

**FORM FOR ADMISSION TO THE SWIMMING CENTRE**

- 1. Name of the applicant: \_\_\_\_\_ For Office Use
- 2. Name of the Institution/Deptt. \_\_\_\_\_ Card no. \_\_\_\_\_
- 3. Date of Birth: \_\_\_\_\_ Receipt no. \_\_\_\_\_
- 4. Father's Name and Occupation: \_\_\_\_\_ Dated. \_\_\_\_\_  
 \_\_\_\_\_ Amount. \_\_\_\_\_

- 5. Address (a) Permanent \_\_\_\_\_  
 \_\_\_\_\_  
 (c) Correspondence. \_\_\_\_\_  
 \_\_\_\_\_



- 6. Enrolment as regular trainee/casual swimmer as student or non student. \_\_\_\_\_

- 7. Membership (Fee Paid) Rs. \_\_\_\_\_

8. It is certified that I have gone through the rules and regulations (overleaf) for the game of swimming and would abide them.

9. It is further certified that I have background of swimming/I have no background of swimming. I am taking the same at my own risk and responsibility.

Signature of applicant: \_\_\_\_\_

Signature of Father/Guardian: \_\_\_\_\_



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**Recommendation of the Head of the Institution/Department**

Certified that applicant is a bonafide student/employee of this School/College/Office and all particulars given by him/her are correct according to the office record. The application is forwarded for enrolment as trainee/casual swimmer as student or non-student. In case of student member the application must be countersigned by the Head of the Institution recognized by the Government.

Signature of Head of Institution/Department.  
(with seal)

Recommended by the Swimming Coach: \_\_\_\_\_

Recommended Pointed with Reasons: \_\_\_\_\_

Signature of Swimming Coach: \_\_\_\_\_