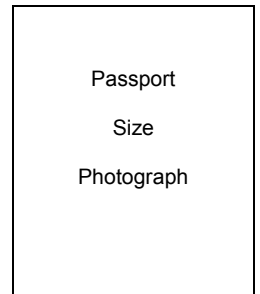


BABA BANDA SINGH BAHADUR ENGINEERING COLLEGE, FATEHGARH SAHIB

SWIMMING MEMBERSHIP FORM

1. Name : _____
2. Father's Name : _____
3. Registration No. : _____
(in case of student)
4. Class/ College Roll No/Dept : _____
5. Date of Birth : _____
6. Amount Deposited : _____
7. Profession (for Outsiders) : _____
8. Address : _____

9. Phone Number : (O) _____ (R) _____
10. Timing to be opted : Morning / Evening _____



I wish to learn/do swimming at my own risk and responsibility and my Head/Principal/Parents have no objection for the same. I have carefully read the regulations regarding use of the Swimming Pool and promise to abide by the same.

Recommendation of the Head/
Principal (with rubber stamp)

Signature of the Candidate

I have no objection to my son/daughter/ward seeking swimming membership at Baba Banda Singh Bahadur Engineering College, Fatehgarh Sahib

Signature of Guardian / Parents
(Full Name & Address)

MEDICAL CERTIFICATE

I have examined Mr. / Mrs. / Ms. _____ S/o / D/o / W/o _____ and found him / her medically fit as he / she does not suffer from any skin disease.

Signature of Swimming Coach

M.B.B.S Doctor / B.A.M.S

Note: Please submit 2 passport size photographs along with this form