

KERALA WATERSPORTS & SAILING ORGANIZATION



OFFICE

TRAINING CENTER

53/489 - A1, Janatha Jn., Ernakulam - 682 019. S. H. College, Thevara, Ernakulam - 682 013.

WEB : www.keralawatersports.org

E - MAIL : info@keralawatersports.org & mail@keralawatersports.org



APPLICATION FORM

SL. NO.

Applied For : Membership Yachting Membership Power Boat Handling Recreational Power Boat Operation

Other, If Any :

Course No. : Scheduled From : To :

New : Certificate No. : Certificate Date :

Renewal : Certificate No. : Certificate Date :

Title : Mr. Mrs. Dr. Miss. Mstr. Ms. Blood Group :

Name :

Son / Daughter Of :

Address :

District : State :

Pin Code : Nationality:

Date Of Birth : Telephone :

E - Mail ID :

Occupation :

Organization :

Experience in On - Water Activities :

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Health constraints, if any :

DECLARATION

I hereby declare that the details furnished above are true to be the best of my knowledge and belief.

Date : Name of the Applicant / Parent Or Guardian Signature

Place :

Paste Stamp Size Photo

K W S O : BOND OF INDEMNITY

The President of K W S O,

The consideration of _____ self / minor of whom I am the legal / natural guardian, being carried at my request to aboard and handle the K W S O Motor Boat / Sailing Boat in charge of any Official[s] or any Member[s] of K W S O or any other person[s] in the employ of the K W S O. I undertake and agree that neither I nor my executors or administrators or other legal representative will make any claim against the Government[s] or against any Official[s] or other Member[s] or any other person[s] in the employ of the K W S O, in respect of any loss or injury to property or person and even if resulting in demise which the said minor _____ [Name] may suffer while the said minor he / she is or in consequent of the said minor being so carried or while he / she is aboard and handles the said Motor Boat / Sailing Boat. I understand and agree that no compensation will be paid by the Government[s] or by any Official[s] or other Member[s] or any other person[s] in the employ of the K W S O, in respect of any loss or injury. I further agree so as to bind myself, my heirs, my executors and administrators, to indemnify you and any Official[s] or other Member[s] or any other person[s] in the employ of the K W S O, against any claim by any means against you or them, or if any arising - out of any act or default on the part of the said minor during, or in connection with such activities to aboard and handle the K W S O Motor Boat / Sailing Boat.

Dated the _____ Day of _____, 2021.

[Signature of the Applicant /

Parent Or Guardian of Dependent]

For K W S O Use		
	Date :	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
	Valid Till :	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cash	Cheque No. : <input type="text"/>	Demand Draft No. : <input type="text"/> Dated <input type="text"/>
Amount :		
Rupees [In Words] : Only.		
Bank & Branch :		
Remarks :		
.....		
Authorized Signatory & Seal :		