

Indian Institute of Information Technology, Allahabad Registration Form - Swimming Pool

Year	Form No
Applicant / Candidate Information	
IIIT Faculty / Officer / Staff / Staff Kid / Student : Enrolment no./Employee ID No	
Name:	
Name of the parent/guardian:	
Course:	
Semester:	
Department:	
Address for correspondence:	
Mobile no – 12	
Email:	
Self Declaration by Applicant/Candidate	
I undertake that the institute is taking every precaution against/accident and will not hold the Institute authorities responsible for any unforeseen accidents/ losses.	
Date: Appl	icant/Candidate Signature
Medical certificate	
 The candidate is free from any skin disease which may spread to oth write) Does the candidate have any past record of fits or epilepsy? 	ners while swimming. (please yes/no
. Other Terms & Conditions	Doctor of Health Center IIIT Allahabad

Other Terms & Conditions

- 1. Applicant has to complete the form including the medical certificate as above.
- 2. Applicant has to submit the Xerox copy of ID card & 2 passport size photographs with registration form.
- 3. The applicant must deposit the fee at the time of submitting the registration form.
- 4. Payment is acceptable only by Credit / Debit cards or Net Banking. Cash payment is not acceptable.
- 5. Applicant must have to follow the timings, Rules & Regulations of Swimming pool.