A Walk into the woods of Satpura Landscape

Program at a glance

Trekking Route (17 Km)
Panarpaani --(4km)-- Badkachaar --(3km)-- Rock Painting Shelter --(2km)-- Shernaala --(4km)-- Pagara-- (4km)

Duration
2 Day & 2 Nights

Date
12th to 14th November 2016

Participants and Procedure
30 Participants will be taken on first come first registration basis. Participants will have to submit registration form (to be downloaded from the website) with other necessary documents. A sum of Rs. 2000/- has to be deposited by each participant in the name of Ecoparyatan Samiti Samardha (Online/Cheque/DD). Participants will have to reach Matkuli on their own, from Matkuli the Samiti will take the charge and will start activities.

Bank Details for Online Payment:

<table>
<thead>
<tr>
<th>Name of account</th>
<th>Branch Name</th>
<th>Account Details</th>
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<tbody>
<tr>
<td>Ecoparyatan Samiti Samardha</td>
<td>Oriental Bank of Commerce Bhopal Raisen Road</td>
<td>A/C No. :- 52742011003085 IFSC:- ORBC0105274</td>
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**While transferring the amount please specify your name in the payment details and send us the transaction number once the payment is successful.**
Tentative Itinerary for the event

Day 1
- Arrival at Matkuli by 2:00 pm
- Lunch 2:00 to 3:00 pm
- Briefing 3:00 to 4:00 pm
- Interaction with Naturalist till 4:00 to 6:30 pm
- Dinner Followed by Bonfire by 8:30 to 9:30 pm

Day 2
- Wake up call 5:00 am
- Breakfast by 5:00 to 6:00 am
- Leave the camp site with packed lunch by 6:15 am
- Reach the start point (Panar Pani) by 7:30 am
- Start the Trek by 7:45 am
- Finished the trek by 5:30 pm
- Return back to base by 7:00 pm
- Leisure time till 8:00 pm
- Dinner followed by Bonfire till 9:00 pm

Day 3
- Wake up call at 6:30 am
- Breakfast and Debriefing by 9:00 am
- Departure
Overnight Camping

1. Name*: 
2. Gender* ○Male ○Female 
3. Father's/ Husband's Name: 
4. Date of Birth*: 
5. Highest Education Qualification*: 
6. Any other Qualification: 
7. Profession*: 
8. Organization*: 
9. Permanent Address*: 
10. Office Address*: 
11. Contact No.*: 
12. Email id*: 
13. Whatsapp phone no. 
14. Demand Draft/Cheque no./ Online Payment Transaction No.*: 
15. Name of the bank*: 

Attachments

1. Photo identity card 
2. Address proof 
3. Signed Indemnity bond 
4. Signed Declaration form

(Signature)
Terms and Conditions

1. The Participant should be physically fit enough to walk 10-15 kms every day.

2. An amount of Rs. 2000 needs to be submitted along with the registration in the form of Demand Draft or Cheque to the Board office. This is inclusive of all the charges for accommodation, food, transportation, etc. for the duration. The amount will not be refunded if the participant withdraws the participation.

3. If due to any unavoidable reason the program gets cancelled by the Board, the amount will be refunded to all the participants.
Declaration

I am _____ years of age and I am medically and I am physically fit to do the event I have registered. I have read and understood the description, terms and conditions, indemnity bond and I accept and agree with the above.

I promise that

1. I will the spread the message of environmental conservation in my work place and where I stay.
2. I will not complaint or take action against the organizing agency in case of cancellation or postponement of the program.

__________________ Signature

Date:

Place:
INDEMNITY BOND

I ........................................................................ hereby state that, I am participating in Trekking camp that is organised and conducted by MP Ecotourism Development Board and their qualified staff at my own free will and consent, I understand and agree that MP Ecotourism Development Board and their staff take all necessary precautions to minimise the risk and avoid any accidents and ensure safe participations in this program and are not responsible for any mishaps that may occur while participating in this program that might result in any injuries or death.

I HAVE READ THE ABOVE STATEMENT AND FULLY UNDERSTAND ITS CONTENTS. I REALISE AND AGREE THAT THE SAME SERVES AS AN AGREEMENT OF RELEASE AND ASSUMPTION THE RISK ON MY SELF.

Contact details of person(s) to be contacted in case of an emergency/
आपातकालीन स्थिति हेतु दो व्यक्तियों के संपर्क विवरण –

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<th>Name/नाम</th>
<th>Relationship/संबंध</th>
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Signature of Participant/ प्रतिपक्षी के हस्ताक्षर