



भारत स्काउट एण्ड गाइड, उत्तर प्रदेश

प्रादेशिक प्रधान कार्यालय : स्काउट भवन, गोल मार्केट, मद्रासगंज, लखनऊ - 226006

रजिस्ट्रेशन संख्या एस० 1-9407/1959-1960

E-mail : upscoutsguides@yahoo.com, Website : www.bsgup.org

फोन : 0522-4323838, मो० नं० : 9839392275



पत्रांक संख्या - SPE/8TH SAP/ 494 /2025-26

दिनांक 09.06.2025

सेवा में,

समस्त जिला संगठन/प्रशिक्षण आयुक्त (स्काउट/गाइड)
भारत स्काउट और गाइड, उत्तर प्रदेश |

विषय : जिला संगठन/प्रशिक्षण आयुक्त (स्काउट/गाइड) हेतु स्पेशल एडवेंचर प्रोग्राम के सम्बन्ध में |

महोदय,

मा० प्रादेशिक मुख्यायुक्त महोदय से प्राप्त स्वीकृति के क्रम में दिनांक 16 से 19 जून 2025 की अवधि में प्रादेशिक प्रशिक्षण एवं एडवेंचर सेन्टर शीतलाखेत, अल्मोड़ा में जिला संगठन/प्रशिक्षण आयुक्त (स्काउट/गाइड) हेतु स्पेशल एडवेंचर प्रोग्राम निः शुल्क आयोजित किया जा रहा है | यह स्पेशल एडवेंचर प्रोग्राम केवल अधिकार पत्र धारक जिला संगठन/प्रशिक्षण आयुक्त (स्काउट/गाइड) के लिए होगा |

अतः उक्त एडवेंचर प्रोग्राम हेतु ऑनलाइन पंजीकरण दिनांक 14 जून 2025 प्रातः 11 बजे तक करना अनिवार्य है और पंजीकरण शुल्क रु० 500 (ट्रेनिंग सेन्टर के विकास हेतु) की रसीद भी ऑनलाइन फार्म में अपलोड करनी होगी | संलग्न ऑफलाइन आवेदन पत्र, मेडिकल फिटनेस प्रमाण पत्र एवं रिस्क प्रमाण पत्र की मूल प्रति शिविर स्थल पर पंजीकरण के समय अनिवार्य रूप से जमा करनी होगी |

भवदीय,

(आनन्द सिंह रावत)

प्रादेशिक सचिव

प्रतिलिपि : निम्न की सेवा में सादर सूचनार्थ एवं आवश्यक कार्यवाही हेतु प्रेषित :-

1. प्रादेशिक मुख्यायुक्त, भारत स्काउट और गाइड, उत्तर प्रदेश |
2. प्रादेशिक आयुक्त (स्काउट/गाइड) भारत स्काउट और गाइड, उत्तर प्रदेश |
3. प्रादेशिक संगठन आयुक्त (स्काउट/गाइड) भारत स्काउट और गाइड, उत्तर प्रदेश |
4. समस्त जिला मुख्यायुक्त, भारत स्काउट और गाइड, उत्तर प्रदेश |
5. सहायक प्रादेशिक संगठन आयुक्त (आई०टी०) एवं प्रभारी एडवेंचर प्रोग्राम |
6. समस्त सहायक प्रादेशिक संगठन आयुक्त (स्काउट/गाइड)
7. सेंटर मैनेजर प्रादेशिक प्रशिक्षण एवं एडवेंचर सेन्टर शीतलाखेत, अल्मोड़ा |

(आनन्द सिंह रावत)

प्रादेशिक सचिव



01.	Arrival	The forenoon of the first day.
02.	Departure	The afternoon of the last day.
03.	Accommodation/ Food/Activities	Accommodation, food, souvenir and kit will be provided free of cost by the UP BSG. All activities including trekking, hiking and visit to nature/tourist/religious places will be conducted free of cost by the UP BSG.
04.	Training Centre Development Fee	500/-
05.	Mode of Payment	ONLINE TRANSFER (NO CASH) State Secretary, U.P. Bharat Scouts & Guides Account No - 10122401342 IFSC Code - SBIN0006144 Bank - State Bank of India Branch- Jawahar Bhawan, Lucknow (Original Bank Pay- In – Slip should be submitted along with the applications at the time of Registration)
06.	Registration Proses	Registration for the camp can be done through Our official website www.bsgup.org or via link and QR code provided below. Click on the link to apply. https://forms.gle/fmDowFWzrc6auKEw8 
07.	Who can Participate	1- Only Warranted District Organising/Training Commissioner (Scout/guide) 2- Medically and physically fit and can bear the strain of Trekking for 12 K.M per day. 3- The maximum age limit for DOC's/DTC'S is 50 years (Male / Female)
08.	Programmes	High Rope Activities : 1. RUSSIAN WALL 2. NET BRIDGE 3. SINGLE LADDERS CROSSING BRIDGE 4. LOG HANGING 5. FIYING TYRE CROSSING 6. VALLEY CROSSING 7. HORIZONTAL TYRE BRIDGE 8. LOOP HANG CROSSING 9. CROSS WALK BRIDGE 10. BURMA BRIDGE 11. SKY CYCLING 12. ZIP LINE 13. ARTIFICAL WALL CLIMBING/ RAPPEALING Ground Level Obstacle : 1. LOG BALANCING 2. ZIG ZAG PLANK WALKING 3. MONKEY CRAWAL 4. COMMANDO BRIDGE 5. BALANCING ON TIGHT ROPE

		6. HORIZONTAL LADDER 7. HANGING HORIZONTAL LADDER 8. VERTICAL ROPE LADDER 9. TARZAN SWING 10. TYRE WALL 11. TIGHT ROPE WALK 12. TYRE CHIMNEY 13. BAMBOO WALL 14. NET CRAWLING 15. SLOTH WALK 16. GROUND TYRE JUMP 17. TYRE TUNNEL 18. BALANCING BEAM 19. ARCHERY 20. SHOOTING (AIR PISTOL/RIFLE) Trekking, introduction of Scouting/Guiding, Nature Study, Camp Fire, Cultural Program etc. (Program may be changed with any notice as per the situation)
09.	Kits to Brings	1- T-shirt, Jeans and Tracksuits, Extra wearing clothes and costumes for cultural items. 2- One set correct and complete uniform as per APRO Part- II & III.(For Uniform members only) 3- Warm Clothes, Jackets, Sweater, Hand Gloves. 4- Hunter/ Sport Shoes, Extra Pairs of Socks and Slippers, Plate(Thali) Glass or Mug, Spoon, Water Bottle. 5- Personal Toiletries, Cold Cream, Odomas, Torch, Note book, PenFirst Aid Kit Sleeping Bag/ Blankets.
10.	Accommodation	Tent and Rooms for Participants at the campus of the Adventure Centre.
11.	Weather	During winter, lowest temperature is around 0°C – 03°C and in summer maximum temperature is around 30°C. Hence, it is advised to carry sufficient warm clothing during winter.
12.	How to reach	The nearest Railway Station is Haldwani , The distance from Haldwani to Sheetlakheth is 90 KM. Buses are available in Haldwani Bus Stand.
13.	Original Document to be submitted after arrival *Mandatory	1- Two recent stamp size color photograph. 2- Application form signed by Participants. 2- Medical Fitness Certificate and Risk Certificate. 3- Parent consent in case of minors. 4- Copy of Aadhaar card / Identify proof of Institution.
14.	Risk Management	Bharat Scout and Guide, Uttar Pradesh take every care of the participants sincerely, but Bharat Scout and Guide, Uttar Pradesh, State Training and Adventure Institute, Sheetlakheth will not be held responsible for any accident, illness or injury during the program. The Escorting teachers should take extra care of their students before the camp, during the camp and after the camp.

15.	Health	<p>1- Medical Checkup should be done strictly.</p> <p>2- General Medicines and First Aid will be available at the Camp Site. Extra medicines for individuals if any will be purchased by the person concerned.</p>
16.	Other Information's	<p>1- Without selection letter/Mail participants will not be admitted in the camps.</p> <p>2- Sheetlaket is a polythene free area. Hence no one should bring polythene bags with them.</p>
17.	Contact	<p>Website: www.bsgup.org</p> <p>Email: stcsheetlaketbsgup@gmail.com</p> <p>Office: 9838726066</p>



BHARAT SCOUT AND GUIDE, UTTAR PRADESH

State Headquarters : Mahanagar, Lucknow

Adventure Program Application form

PHOTO

Date :

Place : State Training and Adventure Centre, Sheetlakheta Almora.

Application For :

- DOC/DTC (S)
- DOC/DTC (G)

1. Name : (हिंदी में) :

Name (Capital Letters) :

2. Father's :

3. Date of Birth : *BSG UID

4. Address :

..... Pin Code

5. District :

6. Mobile No. : Whatsapp No :

7. Email ID :

8. Adhaar No. :

9. Blood Group : Gender

10. Education Quatification : Scouting/Guiding Qualification:.....

11. Hobbies:

Date :

(Participants Signature)

=====For Office Use =====

- Contribution for Welfare of Scouts and Guides Rs. : _____ UTR No _____
- Total Amount : _____ Receipt _____ Date _____

Accountant

Leader of the Camp



BHARAT SCOUT AND GUIDE, UTTAR PRADESH

State Training Centre and Adventure Institute

MEDICAL CERTIFICATE

CAMP NAME : _____
CAMP DATE : _____ to _____
CAMP PLACE : _____

1. Name : _____
2. Address : _____
3. Height : _____ Weight: _____ Blood Group : _____ Age : _____
4. Present/Past illness of Significance : _____
5. Injuries / Operations undergone and present condition : _____
6. Any known allergy to drugs or food stuff _____
7. Is the Applicant Suffering from
 - (i) Any Infectious disease Yes / No
 - (ii) Any Skin disease Yes / No
 - (iii) Mental disease Yes / No
 - (iv) Heart Trouble Yes / No
 - (v) Asthma/Respiratory Diseases Yes / No
 - (vi) Any other disease/defect Yes / No
 - (vii) Any Major Fracture in the Past Yes / No
8. I, on this date _____ have examined Mr./Miss _____ and found Him / Her medically fit/unfit to undergo an Adventure Programme in mountains.

Signature of the Candidate

Medical Officer
Registration Number &
Designation Office Seal

Date : _____

RISKCERTIFICATE/PARENT-CONSENT

It is certified that my son/daughter / ward Mr./ Miss _____ is joining the Sheetlakhhet Centre Adventure Programme with my consent and the organizers shall not be responsible for any illness, injury or accident during the event or journey periods for the purpose. It is further certified that he/she is physically fit to undergo the said Adventure Programme.

Signature of Participants

Signature of Parent / Guardian

Relationship with participant : _____
Name : _____
Address _____

Aadhar No: _____
Mobile No _____ Date _____