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# Ghatkopar Jolly Gymkhana Marathon & Fitness Group



SEASON: 2018-2019

## ENROLMENT CUM SELF DECLARATION FORM

Name of Participant: \_\_\_\_\_  
Please  : Life Member / Associate Member

Sr.#	CREDENTIALS	PHYSICAL DATA
1	Membership Type & #	Chest size _____ Inches (for T shirt)
2	Sex <input checked="" type="checkbox"/> Male / Female	Waist Size _____ Inches (for pant/short)
3	Date of Birth (dd/mm/yyyy)	Height _____ Inches
4	Age as on 1 <sup>st</sup> February _____ Years	Weight _____ Kgs
3	Mobile #	
4	Email id	

Please  the programme for which you wish to undergo training:

Full Marathon 42Kms  Half Marathon 21Kms  FITNESS  Kids Training

**Health related self-declaration: Please answer the question below:**

During the last 5 years, have you ever had a surgery &/or suffered from a decease/medical condition like heart attack, high blood pressure, anaemia, leukaemia, chest pain, shortness of breath, epilepsy/fits, migraines, hernia/rupture, hepatitis, cirrhosis, speech defects, hearing impairment, nervous or mental condition, stress/depression, back/neck/shoulder/leg/feet pain/injury, arthritis, allergies, psoriasis, eczema, &/or lost time from effective work /school/college due to fatigue/sleeplessness/injury/hazardous work environment &/or made any claim against the employer/availed superannuation due to injury, &/or occasionally taken illicit or stimulants/sedatives/drugs/alcohol regularly/occasionally, or aware of any of your condition that affect your perform your duties

**Member's General Self-Declaration:**

I \_\_\_\_\_, hereby declare that  
(i) the above information is based on my medical report and are TRUE and CORRECT to the best of my knowledge and belief, (2) I am also fully aware that I may need to undergo rigorous physical training including many long distance practice runs and qualifier races as may be required during the year for the training programme I opted for, (3) I am solely responsible for my decision to opt & undergo the above training programme and (4) I and/or any of my family members shall not hold Ghatkopar Jolly Gymkhana &/or the Coach/es or others responsible for any of my health-related issue or otherwise that may arise whenever and/or wherever during or after the above training programme.

Place: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of the Member participant ↓