

# **ITINERARY FOR ADI KAISH YATA (SPECIAL PACKAGE)**

by Vision Himalaya

<b>Day</b>	<b>From - To</b>	<b>REMARK</b>
Day 1	DHARCHULA TO NAJYANG	BY JEEP 40 KMS AND TREK 9 KMS FROM GALA
Day 2	NAJYANG TO BUDI	TREK 12 KMS
Day 3	BUDI TO NAPALCHU	TREK 7 KMS AND VEHICLE 9 KMS
Day 4	NAPALCHU TO KUTI	VEHICLE 14 KMS AND TREK 6 KMS
Day 5	KUTI TO JYOLINGKONG	TREK 14 KMS UPHILL
Day 6	JYOLINGKONG TO JYOLINGKONG	LOCAL TREK 6 KMS
Day 7	JYOLINGKONG TO KUT	DOWN HILL 14 KMS
Day 8	KUTI TO NABHIDANG	6 KMS DOWN HILL 21 KMS VEHICLE AND THEN 9 KMS TREK. TOTAL TREK 15 KMS
Day 9	NABHIDANG TO BUDI	18 KMS VEHICLE AND 16 KMS DOWN HILL TREK
Day 10	BUDI TO NAJYANG	12 KMS TREK DOWN HILL
Day 11	NAJYANG TO DHARCHULA	9 KMS TREK AND 40 KMS VEHICLE

**RATES :-** Rs. 30,000 per Yatri including Service Tax(Dharchula to Dharchula)

## **FACILITIES &**

VEHICLE FACILITY WHICH WILL REDUCE THE TREKKING BY MINIMUM OF 60 KMS TO 75 KMS.

1. SPECIAL TRAINED GUIDES (CERTIFIED). TRAINED FOR EMERGENCY SITUATIONS.
2. LOCAL GUIDES AND WORKERS WITH IN-DEPTH KNOWLEDGE ABOUT THE LOCAL AREA.
3. AS WE ARE PROMOTING VILLAGE STAY AND FOOD AND CULTURE. CLIENT WILL LEARN AND EXPERIENCE THE TRIBAL CULTURE AND TRADITION.
4. FOOD OUR MENU WILL USUALLY CONSIST OF MORNING TEA THEN BREAKFAST WHERE WE WILL PROVIDE PARATHA, PURI CORNFLAKES, BOURNVITA, TEA /COFFEE. LUNCH WILL BE RICE DAL SABJI (AS IS AVAILABLE) PAPAD PICKLE CHAPATI. TEA WILL HAVE SOME SNACKS AND TEA. EVENING SOUP AND THEN DINNER WILL HAVE CHAPATI RICE DAL AND SABJI WILL ALSO HAVE A SWEET DISH.
5. STAY. IN NAJYANG WILL PROVIDE TENT ACCOMMODATION BUDI WILL PROBABLY BE EITHER VILLAGE OR AT CAMP. NAPALCHU WILL BE VILLAGE STAY. KUTI TOO WILL BE VILLAGE STAY. ADIKAILASH(JYOLINGKONG) WILL BE CAMP. AND NABHIDANG (AUM PARVAT )WILL ALSO BE CAMP.
6. LUGGAGE OF ABOUT 15 KGS WILL BE TRANSPORTED BY OUR MULES FOR THE TREK
7. WE ALSO INTEND TO HAVE A TRAINED LOCAL EXPERIENCED MEDICAL PERSON IN HIGH REGION OF KUTI AND JYOLINGKONG.
8. RATES WILL BE 30,000/ RUPEES FROM DHARCHULA TO DHARCHULA PER PERSON (THIS RATES IS INCLUDING TAXES).
9. WE WILL CATER TO ONLY 10-15 PERSON IN A GROUP. NOT TO EXCEED 15 MEMBERS.

( IF A GROUP SO WISHES WE WILL ARRANGEMENTS FROM KATHGODAM TO KATHGODAM OR ELSE WHERE BUT GROUP WILL BE CHARGED EXTRA FOR THIS SERVICE.)

NOTE :-

- 1) LODGING AND BOARDING FACILITY ON RETURN DAY (DAY 11) ARE INCLUDED IN THE ABOVE PACKAGE.
- 2) ACCOMMODATION WILL BE PROVIDED BY VISION HIMALAYA IN ECO-FRIENDLY TENT AND TRADITIONAL HOUSES ENROUTE.
- 3) VISION HIMALAYA SHALL ENSURE TO COORDINATE WITH THE PARTICIPANTS ON ARRIVAL/REPORTING DAY OR FOR FURTHER NECESSARY ARRANGEMENTS I.E. INNERLINE PERMIT, ARRANGEMENTS ENROUTE ETC.

\*\* Cancellation Rules as applicable.

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## APPLICATION FORM FOR ADI-KAILASH & OM PARVAT YATRA (2015)

(Approved by Indian Mountaineering Foundation (IMF), New Delhi)

PASSPORT SIZE  
PHOTOGRAPH

(Form shall be filled up in Capital Letters)

1. Name Mr./Mrs./Miss.....
2. Father's/Husband's Name.....
3. Nationality.....
4. Tel.Resi.:..... Tel.Office:..... Mobile:..... Occupation:.....
5. Complete Address (As per ID) .....  
..... State..... Pin.....  
e-mail ID.....
6. Date of Birth:..... Present Age.....
7. If Passport holder, Passport No..... Valid Upto.....
8. Next to kin (Relationship, Name & Address).....  
..... Pin:.....  
Tel.No. (Res./Office)..... Email.....

9. Further, I hereby give undertaking that:

- I, Mr./Mrs./Miss.....agree to adhere strictly to the discipline of the programme and abide by the directions of the organizers at all times during the programme. Also I agree that Nigam have full right to change the schedule of Yatra in case of any natural calamity, political unrest or any other type of unfavorable circumstances.
- I hereby declare that I am participating in this Trekking Cum Pilgrimage programme on my own risk and responsibility. In case of any accident, illness or injury, resulting to any type of disability, including loss of belongings or death, I will not hold its organizers or organization in any way responsible.
- I understood and agree that incase I am required to give up the programme at any stage, for any reason whatsoever, participation fees paid will be non-refundable. I have read and accept the cancellation rules for Adi Kailash/Om Parvat Yatra 2015.
- I do not have any infectious disease neither physically disabled and I am keeping good health, in support I have attached Medical Fitness Certificate.
- I hereby declares that I am physically fit for the yatra I had read the itinerary and I am capable of walking the entire trek route as per itinerary. In case of any disability(to walk during yatra route) the required arrangements will be made and borne by me.

Note – Please note that any claim, dispute, court case etc. shall be subject to Nainital Jurisdiction only.

I am sending the participation fees Rs.....by  
Crossed Demand Draft No.....Dated.....of  
Bank.....in favour of “Kumaon Mandal Vikas Nigam  
Ltd.”.

Organisers  
Stamp

Place :

Date :

Signature of Applicant

**NOTE:**

- (1) Every participant must have sound health, with normal eyesight.
- (2) Anyone suffering from - any sort of Heart disease, Blood Pressure problem, Diabetes, Colour blindness, deafness, weak eyesight or any kind of physical disability – is advised **NOT** to participate in this hazardous trekking cum pilgrimage programme.
- (3) Participate should not be suffering from any infectious disease.

**MEDICAL FITNESS CERTIFICATE**

Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date:

\_\_\_\_\_

This is to certify that I have examined and investigated Shri/Smt/Miss \_\_\_\_\_  
\_\_\_\_\_ today and found that h e /she is physically fit to undertake high  
altitude pilgrimage to Adi Kailash / Om Parvat.

Signature of Shri /Smt/Miss \_\_\_\_\_

His / Her Blood group is \_\_\_\_\_

Signature  
(Doctor/Medical Authority)  
Reg.No.

# Application form for Entry Permit in the Notified Area

1. Name of the Applicant : \_\_\_\_\_  
(In Capital with Parentage) \_\_\_\_\_

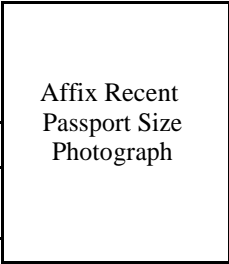
2. Sex : \_\_\_\_\_

3. Identification marks : \_\_\_\_\_

4. Age : \_\_\_\_\_

5. Home Address : \_\_\_\_\_

6. Profession : \_\_\_\_\_



7. Purpose of visit to  
Notified Area : Pilgrimage

8. Name of places where  
Applicant wishes to Visit : Jollingkong for Adi Kailash(Chota Kailash)  
Nabhidhang for Om Parvat.

9. Period of stay for which  
Permission is sought : 20 days.

10. Name of any two friends/  
Relations or reference in  
Notified area if known to  
Applicant. 1) .....  
.....  
.....  
2) .....  
.....  
.....

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

(Signature or Thumb Impression Of applicant)

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**(To be filled in the office of Issue)**

Reference of Permit issued : \_\_\_\_\_

Book No. : \_\_\_\_\_

Serial No. : \_\_\_\_\_

**(Standard ID proof)**  
**Police Clearance Certificate**

**Office of the Inspector of Police**

Dated :            Police Station \_\_\_\_\_

**CERTIFICATE**

This is to Certify that Shri / Smt. \_\_\_\_\_  
\_\_\_\_\_ is staying at \_\_\_\_\_  
\_\_\_\_\_ since last \_\_\_\_\_ years.

The area comes in \_\_\_\_\_ Police Station jurisdiction and there is no any  
adverse report against him/her as far as \_\_\_\_\_ Police Station  
concerned record.

Signature and Seal

(Inspector of Police)

Police Station \_\_\_\_\_

**Note:** This form is not necessary to fill out if the candidate have character certificate (Issued by authorized signatory) and standard ID proof.

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