

# KAILASH MANASAROVAR



सत्यमेव जयते  
Ministry of External Affairs  
Government of India

# Yatra

**Get ready to scale new heights, explore beauty, experience spirituality and discover yourself**

Kailash Manasarovar Yatra, known for its religious value, cultural significance, physical beauty and thrilling nature, is organized by Ministry of External Affairs every year. Holding significance for the Hindus as the abode of Lord Shiva, it holds religious importance also for the Jains and the Buddhists.

**ELIGIBILITY:** Indian nationals aged 18-70 years on 01.01.2013 who wish to proceed for religious purpose.

**DURATION:** 25 days for each of the 18 batches from June-September.

**FITNESS:** Given the extremely arduous nature of the Yatra, only those who are physically fit and healthy should apply to undertake the Yatra, purely at their own volition, cost, risk and consequences.

**SELECTION:** By computerised draw, followed by medical tests in Delhi and Gunji.

Last date to file online application: 04 March 2013  
Last date to file paper application: 11 March 2013  
Fees are payable after selection

For application form and information, visit:  
KMY: <http://kmyatra.webstarts.com>  
MEA: <http://mea.gov.in>

## KAILASH MANASAROVAR YATRA (KMY) – 2013

June – September

For official use only:

Registration No.

Remarks:

Provide three recent passport size coloured photographs:

- ◆ One photo to be affixed here.
- ◆ Two photos to be attached with Name, Date of Birth, and Blood Group written at the back.

### APPLICATION FORM FOR YATRIS

- ▶ Only **INDIAN NATIONALS** are eligible to apply. For details, visit: <http://kmyatra.webstarts.com>
- ▶ Duly completed (1) Application Form, (2) Three Photographs, and (3) Passport copy of personal and family details pages, must reach by **MONDAY, 11 MARCH 2013** at the address below: Attaché (China), China Registry, Room No.255-A, Ministry of External Affairs, South Block, New Delhi 110 011. Tel: 011-2301-4900. e-Mail : [kmyatra@mea.gov.in](mailto:kmyatra@mea.gov.in)
- ▶ Application form be filled in **BLOCK LETTERS** in **HINDI** or **ENGLISH** after carefully reading detailed Guidelines.
- ▶ Applicants may send their applications by **REGISTERED INDIA POST** or **SPEEDPOST**.
- ▶ **Strike out the portion which is not applicable.**

1. Applicant's full GIVEN NAME (as in passport):											
Applicant's SURNAME (as in passport):											
2. Father or Mother's full name: <b>Mr   Mrs</b>											
3. Date of birth (as in passport):								4. Sex:		MALE FEMALE	
5. Blood Type: O+ A+ B+ AB+ O- A- B- AB-								6. Are you a Medical Doctor:		YES NO	
7. Religion: Hindu   Sikh   Jain   Buddhist   Other (specify) ...								8. Profession:			
9. (a) Indian Passport No.								(b) Place of Issue:			
(c) Date of issue:								(d) Date of expiry:			
10. Full postal address:											
District:						State:			PIN Code:		
Telephone:		STD Code:		Home:		Office:		Mobile-1:		Mobile-2:	
e-Mail address:											
11. Next-of-kin details for emergency: Name:											
Mobile:						Landline:					
e-Mail address:											
12. Have you been on MEA's KM Yatra before?				(a) As Yatri		YES NO		(b) As Liaison Officer		YES NO	
If yes, details thereof:				(c) Number of Visits:		(d) Years of last three Yatras:					
13. How did you come to know about KMY-2013?								Newspaper   TV   Radio   Internet   Friend   Relative   Former Yatri   Other			
14. Is your wife/husband also applying for KMY-2013?								YES NO			
If yes, his/her full name: <b>Mr   Mrs</b>											

### DECLARATION AND UNDERTAKING BY APPLICANT:

1. I understand that: Kailash Manasarovar Yatra is a high altitude trekking expedition under inhospitable conditions, which may involve serious risk to the person or property of the Yatri • My application will be rejected and not processed if it is incomplete in any respect • If I have given wrong information in my application, this will be ground for disqualification from the Yatra and for forfeiture of deposit paid for the Yatra • Decisions of ITBP medical authorities in Delhi and Gunji are final and cannot be challenged • In the event of my being disqualified on medical grounds by the competent medical authorities in Delhi or in Gunji, I shall forfeit the entire amount paid for the Yatra • The decisions taken by the Liaison Officer to maintain security and discipline during the Yatra will be final and binding including any decision to repatriate any Yatri. In such circumstances, I shall forfeit the entire amount paid for the Yatra • Indiscipline or misconduct during the Yatra, including unauthorized deviation from the official Yatra route, shall attract serious penalties against me, including non-issue of Yatra completion certificate and ban on participation in the Yatra in future.
2. I undertake that: I shall bear full responsibility for expenses on emergency medical treatment as well as emergency land and air evacuation, if need arises during the Yatra • After confirming my participation, if I am unable to proceed on or complete the Yatra for any reason, my entire deposit shall be forfeited • I am undertaking the Yatra at my own volition, cost, risk and consequences.
3. Legal: I further understand that without prejudice to the foregoing, all claims, disputes and differences shall be subject to the jurisdiction of Courts in New Delhi only.



PLACE: \_\_\_\_\_  
DATE: \_\_\_\_\_

SIGNATURE OF APPLICANT