Ref. No: CWCCL/2024-25/Notice No-139

Date: 28.11.2024

NOTICE

All the BA. LL.B, LL.B and LL.M students are hereby informed that college is organizing a visit to Supreme Court of India, Parliament House, Rashtrapati Bhavan, Akashkardham, Red Fort/ Kutub Minar, Dr. Babasaheb Ambedkar Memorial in first week of March i.e from 4th March 2025 to 8th March 2025. All the interested students are hereby required to register their name with admin office on payment of requisite fees, Copy of Aadhar card, and duly filled Consent form.

Marve Road, Malad (West), Mumbai-400 064 Maharashtra (India)

Event date- 04/03/2025 to 09/03/2025.

Fees- Rs.16,500/-

Last Date of Registration - 20/12/2024. (45 seats only, First come First serve basis)

Inclusions- Mumbai to Delhi- 3A/C Train, Delhi to Mumbai- A/C Rajdhani Express. Delhi Transportation by A/C bus, Accomadation in A/c room on sharing basis All breakfast, Lunch and Dinner inclusive.

(Note-Register as soon as possible for confirmed train tickets).

28/11

c Principal.

CWC's COLLEGE OF LAW STUDY TOUR TO SUPREME COURT OF INDIA Parental/Guardian Consent Form and Liability waiver

Participant s/child's name and birth date:	
Parent's/guardian's name:	
Parent's/guardian's address:	
Parent's/guardian's phone number(s):	
Parent's/guardian's email address:	
Type of event STUDY TOUR TO SUPREME COURT OF INDIA	
Event location: DELHI	
Individual(s) in charge: 3	
Date and time of departure and Return: 04/03/2025 to 09/03/2025	
Mode of transportation(s) involved TRAIN AND BUS	
As parent and/or legal guardian. I remain legally responsible for any personal actions taken by the above-named participant.	
I agree on behalf of myself, my child named herein, or our heirs, successors and assigns, Legal Representatives to hold harmles officers, directors and agents, and any other representatives associated with the event, from any and all actions, claims, demands, expenses and all consequential damage arising from or in connection with my child, attending the event or in connection with any illimination therewith, and agree to compensate the Organizer, its officers, directors and agents, or representatives reasonable attorney's fees and expenses arising therewith of my child. I hereby warrant that to the best of my knowledge, my child all responsibility for the health of my child.	damages, costs, injuries/death, ness or injury or cost of medical
Date:	
Sign:	
Name:	