



# APPLICATION FOR PN HAJJ CONTINGENT

Year: \_\_\_\_\_

Category		Station		Package		
Serving	Retired	Karachi	Islamabad	Short duration Star Group	Long duration Star Group	Long Duration Economy Group
Total number of seats applied for (including self)						<input type="text"/>

## PART - I

Name: \_\_\_\_\_

Rank / Rate: \_\_\_\_\_ Service No. \_\_\_\_\_

Father's Name: \_\_\_\_\_

Religion: \_\_\_\_\_ Sect: \_\_\_\_\_

Date of Commission / Enrollment: \_\_\_\_\_ Unit: \_\_\_\_\_

Blood Group: \_\_\_\_\_ Nationality: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

CNIC No: \_\_\_\_\_ Date of Expiry: \_\_\_\_\_

Whether performed Hajj earlier? \_\_\_\_\_ (If Yes mention Year) \_\_\_\_\_

Present Address: \_\_\_\_\_

Tele No. Office: \_\_\_\_\_ Res: \_\_\_\_\_

Cell No \_\_\_\_\_ What's App No \_\_\_\_\_

Name & Address of the person in Pakistan / NOK to be contacted in case of emergency / casualty at KSA: Name: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship: \_\_\_\_\_ CNIC: \_\_\_\_\_

Cell No: \_\_\_\_\_ Any other number: \_\_\_\_\_

**Option for Room Sharing (for Makkah and Madinah Only):** (Please tick relevant box)

QUAD Sharing

(Four persons normally will be accommodated in a room. Ladies and gents will stay in separate rooms)

TRIPLE Sharing

(With additional charges subject to availability / seniority)

DOUBLE Sharing

(With additional charges subject to availability / seniority)

**Volunteer to assist / support other fellow Hujjaj:** Yes: \_\_\_\_\_ No: \_\_\_\_\_

**PART – II**

**DECLARATION / CERTIFICATE BY APPLICANT**

1. I hereby solemnly declare that:-
  - a. I am Muslim and believe in the absolute and unqualified finality of the Prophethood of Muhammad ﷺ as the last of the Prophet.
  - b. I do not recognize any person who claims to be prophet in any sense of the word or of any description whatsoever after Muhammad ﷺ are recognize such a claimant as Prophet or a religious reformer as a Muslim.
  - c. I consider Mirza Ghulam Ahmed Qadiani to be an imposter Nabi and also consider his followers whether belonging to the Lahore or Qadiani group to be Non-Muslim.
2. I solemnly affirm that I fulfill all the conditions of eligibility as per PN Hajj Policy and that the information given by me is correct to the best of my Knowledge. I understand that incorrect information will render me ineligible for Hajj and will make me liable to disciplinary action.
3. I along with my dependants will accept policies of Ministry of Religious Affairs (MoRA) and instructions given for smooth conduct of PN Hajj Contingent by MRI Dte. and I will not demand any exclusive / extra services which are not included in the given package.
4. I along with my dependants will accept Saudi Taleemat concerning burial of dead body in KSA. (NoK and relatives will not insist to transport me or my dependant's dead body to Pakistan).
5. I am willing to pay any additional Tax / levy, if imposed by KSA Govt and accept changes in schedule and facilities made by MRI Dte at any stage.
6. I will not object on the traffic plan issued by the Govt. of KSA for movements.
7. I will accept accommodation plan, issued by MRI Dte for hotel / building and will not ask for change.
8. I have no objection in sharing of room at Azizia and tents at Mina with other participants of the PN Contingent on gender basis.
9. I certify that I or my dependant will not insist on any solo journey and will move along with PN Contingent.
10. I am not serving abroad or deputation or undergoing any course etc.

\_\_\_\_\_  
(Signature of Applicant)

Full Name: \_\_\_\_\_

Rank / Rate: \_\_\_\_\_

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

**PART – III**

**CERTIFICATE BY COMMANDING OFFICER / EQUIVALENT (FOR SERVING ONLY)**

Certified that the information given by the applicant is correct as per record and recommended for inclusion in PN Hajj Contingent.

\_\_\_\_\_  
(Signature of Commandant / Equivalent)

Full Name \_\_\_\_\_

Rank \_\_\_\_\_

Date \_\_\_\_\_

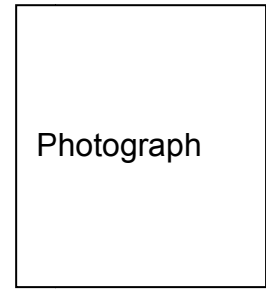
Official Stamp



**PN HAJJ CONTINGENT**

**APPLICATION FOR DEPENDENT PILGRIM**

**PART – I**



Name of dependant: \_\_\_\_\_

Photograph

Father's Name: \_\_\_\_\_

Profession: \_\_\_\_\_ Nationality: \_\_\_\_\_

Religion: \_\_\_\_\_ Sect: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Relationship with applicant: \_\_\_\_\_ Blood Group: \_\_\_\_\_

CNIC No: \_\_\_\_\_ Date of Expiry: \_\_\_\_\_

Whether performed Hajj earlier? \_\_\_\_\_ (If yes, mention year) \_\_\_\_\_

Present Address: \_\_\_\_\_

Cell No: \_\_\_\_\_ What's App No: \_\_\_\_\_

Name & Address of the person in Pakistan / NOK to be contacted in case of emergency / casualty at KSA: Name: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship: \_\_\_\_\_ CNIC: \_\_\_\_\_

Cell No: \_\_\_\_\_ Any other number: \_\_\_\_\_

**PART – II**

**DECLARATION OF DEPENDENT**

I, \_\_\_\_\_, hereby solemnly declare that I am Muslim and believe in the absolute and unqualified finality of the Prophethood of Muhammad ﷺ as the last of the Prophet. I do not recognize any person who claims to be prophet in any sense of the word or of any description whatsoever after Muhammad ﷺ are recognize such a claimant as Prophet or a religious reformer as a Muslim. I consider Mirza Ghulam Ahmed Quadiani to be an imposter Nabi and also consider his followers whether belonging to the Lahore or Quadiani group to be Non-Muslim.

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

\_\_\_\_\_  
Signature of Dependand

**PART – III**

**CERTIFICATE BY THE APPLICANT IN RESPECT OF HIS / HER DEPENDANT**

I solemnly affirm that the information given above is correct to the best of my knowledge and agree that my dependant will abide by the conditions laid down by Ministry of Religious Affairs and NHQ (MRI Dte), Islamabad.

\_\_\_\_\_  
(Signature of Applicant)  
Full Name \_\_\_\_\_  
Rank \_\_\_\_\_  
P/ PJO No \_\_\_\_\_

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

**Note: Please use separate application form for each dependent accompanying for Hajj.**