Undertaking

То,
Embassy of India,
Subject: Consent Form for evacuation from(City, Country)
1. I,
2. I confirm my readiness to follow all instructions given by the officials of Government of India/Embassy of India/Aircraft crew/medical personnel on arrival.
3. I am also willing to undergo a 14 days mandatory quarantine on my arrival in India at my own expense as per the protocols framed by the Government of India.
(Signature with date)
Name:
Passport Number:
Mobile :
Email :