

Date :	Admission r	10	:
		-	

Admission Form

(To Be Filled By Parent/Guardian of Child)
(All Details should be filled in Capital Letters)

lame :				
Oate of Birth :	P	hoto		
Preschool	Year 2 (Pre-Nursery)	Care		
amily Information (In case of admission amily Type : Joint	ermina & Success			
Mother's Name	Occupation			
Qualification	Designation Please Affi	lv a		
Name Of Organisation / Employee	Recent Pass Size Photog	port		
Address (Business/Office)	of Mothe			
Off. Telephone:Mol	bile No:E-mail:			
Father's Name	Occupation			
	Designation Please Affi	Please Affix a		
Qualification				
Qualification Name Of Organisation / Employee	Recent Pass Size Photog	raph		
Name Of Organisation / Employee		raph		
Name Of Organisation / Employee Address (Business/Office)	Size Photog	raph r		
Name Of Organisation / Employee Address (Business/Office)	I, Daycare & Activity Centre	raph r		
Name Of Organisation / Employee Address (Business/Office) Off. Telephone:Mol Name of Guardian (if applicable)	Daycare & Activity Centre	raph r		
Name Of Organisation / Employee Address (Business/Office) Off. Telephone:	Daycare & Activity bile No: Relation to child Qualification	raph r ix a sport raph		

Family Information (Continued)									
Sibling Details : Name : School :							Brother Class :	Sister		
Is the child adopted	□Yes		No	{if yes kind	s kindly attach Adoption Certificate (Notarized copy)}					
Mode of Communication	n									
Preferred Mode Of Cor	nmunication	☐ E-Mail		/ Father/ Guar / Father/ Guar		Telepho SMS		ather/ Guardian		
Terms and Condition	ons :									
Fees once paid is No. Transfer of student to of Student reserved. A minimum of 75% as PARENT/GUARDIA	ther Junior Champ es the right to sui attendance is exp	s Playschool wi tably amend th ected by stude	ill be as per ne school	r terms & conditi fees from time	ons of student tra		ilicy in forceat t	he time of transfer.		
I agree to my child's ph The undersigned certifi 1. The fees charged 2. The decision of th 3. Management's Rig may require. 4. Management's Rig Undersign certifies that each to abide by the terms a Signature of Mother/Gu	es that the following is Non Refundable management of the application	ing are acceptable & Non Transhall be final changes to the work books/ actetion and the info	able to hir sferable. e fees and tivity book ormation ins knowledge	m/her: I curriculum im ss/ any materia serted/used here e.	plemented from	n time to	in class. I, is true and co	rrect. I undertake		
FOR Date of Submission Admission for Time / Batch Preferer Checked and process Date and Signature of	sed by	ATOR'S USE	yca	F	ate of Fee Red ee Receipt No	ceipt re of Acc	: countant :			
Remark (If Any):		CCEPTANCE	OF APPLI	I ICATION AND	ADMISSION		8			
Signature of Centre	неад					Dat	e			

ADDRESS: SRIJAN PLAY WAY, Obra, Sonbhadra (231219), Uttar Pradesh

Phone: 1234567897