

<b>REGISTRATION FORM</b>
<b>KINDERGARTEN</b>

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Reg. No :

Date:

**(FILL IN THE REGISTRATION FORM IN BLOCK LETTERS ONLY)**

Name of the Applicant:

Gender:                      Date of Birth:

Religion:                      Caste:                      Sub Caste:

Mother Tongue:                      Blood Group:

Name of Father:

Educational Qualification of Father:

Profession of Father: