REGISTRATION FORM

KINDERGARTEN

KINDENGANTI

Date: 12-03-2021

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(FILL IN THE REGISTRATION FORM IN BLOCK LETTERS ONLY)

Name of the Applicant: ccc

Gender: Boy Date of Birth: 09/03/2021

Religion: Caste: Sub Caste:

Mother Tongue: Blood Group:

Name of Father:

Reg. No: 444

Educational Qualification of Father:

Profession of Father: