



SUNRISE PUBLIC SCHOOL

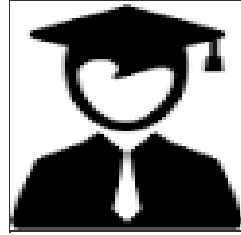
Address: Bati- Bajna Road, Mathura

Contact: 8477993993

Email Id: sunrise0565@gmail.com



Shivani



Registration Form

Registration No.121 Date of 19-Nov-2023 Registration Fee Paid
We, Shivani and
desire to have our son / daughter / ward whose particular are given below admitted as a day scholar in your school.

Information Of Child

First Name Divyansh Last Name
Gender male Email Mobile No. 6395194072
Date of Birth Aadhar No
Religion Cast Class Section
Student Family ID SRN No.

Information Of Parents

Father's Name Shivani Qualification Occupation
Address Bajna Chauraha, Mathura
Mother's Name Qualification Occupation



Acknowledgement

Received the registration form and other supporting documents form in respect of master/miss
for Registration to class of the school for the academic session

Registration Form No. (Signature)
Received on on Time Date 19-Nov-2023 Authorise Signatory