

**BIRLA INTERNATIONAL SCHOOL**

**SCHOOL LEVEL FEE COMMITTEE (SLFC)**

**CONSENT FOR MEMBERSHIP**

To  
The Chairman  
School Level Fee Committee (SLFC)  
Birla International School, Kishangarh

Dear Sir,

I, ..... Father/Mother of Ms/Master .....  
..... Class ..... Scholar Number .....

wish to be a member of SLFC and I undertake to abide by the decisions of the Committee.

My contact mobile number is: .....

Signature: .....

Name: .....

Date: .....

**Note:** Please scan the signed copy of this form and mail to the [info@bisk.edu.in](mailto:info@bisk.edu.in) on or before 15 Nov 2021 by 04:00 pm.