



**REGISTRATION FORM 2024-25**

**STUDENT INFORMATION**

Registration No: \_\_\_\_\_

1.	Class to which admission is sought	:	<input type="text"/>
2.	Student's Name ( in Capital Letters)	:	<input type="text"/>
3.	Father's Name - ( in Capital Letters)	:	<input type="text"/>
4.	Mobile No	:	<input type="text"/>
5.	Email ID	:	<input type="text"/>
6.	Mother's Name - ( in Capital Letters)	:	<input type="text"/>
7.	Mobile No	:	<input type="text"/>
8.	Email ID	:	<input type="text"/>
9.	Date of Birth	:	<input type="text"/>
10.	Gender	:	<input type="text"/>
11.	Nationality	:	<input type="text"/>
12.	Class/School last attended	:	<input type="text"/>
13.	Medium of instruction in previous school	:	<input type="text"/>
14.	Medical (Any allergies / disability/ health problems)	:	<input type="text"/>
15.	Address for correspondence	:	<input type="text"/>

**Parent/Guardian Signature**

**FOR OFFICIAL**

Registration fees paid through:  
 Draft No./Cheque No./Cash \_\_\_\_\_ Dated \_\_\_\_\_ Name of the Bank \_\_\_\_\_  
 Amount Rs. \_\_\_\_\_ Receipt No. \_\_\_\_\_ Reg.No. BPSK/ \_\_\_\_\_ / \_\_\_\_\_

Signature \_\_\_\_\_  
 Name of the Receiver: \_\_\_\_\_