

Form No.

Receipt No.

Date (Form issue)

Name

Age

Mobile No.

Date of Admission

Date of Joining

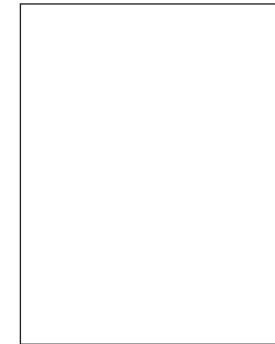
Issued By



vedaant[®] VIDHYAKULUM

Residential Summer Camp

"The Great Summer Jaunt"



1. Form No _____ D.J. _____ D.C. _____

2. Registration No. _____ Receipt No. _____ Date : _____ Batch: _____ Registration Amount : Rs.50/-

3. Name of The Pupil _____

4. Age _____ Gender _____ Grade _____ School _____

5. Residential Address : _____

6. Mother's Name _____ 6. Father's Name _____

Occupation _____ Occupation _____

Contact No. _____ Contact No. _____

Email ID _____ Email ID _____

7. Local Guardian's Name & Relation _____

Address _____ Contact No. _____

8. Health Status - Does your child suffer from any food allergy, illness, disability or other medical condition ? Yes / No

Details - _____

9. Tick your Summer Camp Category

Category	Duration	Fee	Tick
A. (for both boys & girls)	6 days 5 nights	5000/-	<input type="checkbox"/>
B. (for both boys & girls)	3 days 2 nights	3000/-	<input type="checkbox"/>
C. (only for girls)	8 days 7 nights	10,000/-	<input type="checkbox"/>

10. Preferred activities (any three including outdoor & indoor activities)

1)..... 2)..... 3).....

FEE ONCE DEPOSITED WILL NOT BE REFUNDED IN ANY CASE

The information furnished above is true to the best of my knowledge. I understand that the school has right to accommodate my ward in any of the activities. The school reserve the right to add or discontinue any activity in addition to those listed.

I hereby undertake on behalf of my ward _____ who is participating in the camp at his own risk that no claim will be made by either of us in case of any loss of property, accident or injury.

Date : _____

Signature of parents _____

Place :

Name of Signing Parent :

Received an amount of Rs./- only towards fees for the following activities :

- 1. _____
- 2. _____
- 3. _____

Reg. No _____
 Rec. No _____
 D.J. _____ D.C. _____
 Auto/Van fellow Name & No. _____



Contact us @ 82259 55500