MAX KIDS
Dwarka

REGISTRATION FORM

Session: 20_____-20_____

Please affix father's photograph here.

Please affix mother's photograph here.

Please affix your child's photograph here.

Name: _____

Registration No.: _____

Class: _____

MAX KIDS

Empowering Life

www.maxkidsdwarka.com

Child's Details

Name of the child (in Block letters): _____

Sex M ☐ F ☐

Date of Birth (in figures) D D M M Y Y ☐☐☐☐☐☐ (in words) _____

Age as on 31-03-20 _____

Place of birth: _____ Nationality: _____

Previous school attended _____

Details of Father

Name _____

Date of Birth _____

Occupation _____
(Service/Business/Profession/Others)

Designation _____

Name of the Organisation _____

Office / Business address _____

_____

Phone No. _____ Mobile _____ E-mail _____

Details of Mother

Name _____

Date of Birth _____

Occupation _____
(Service/Business/Profession/Others)

Designation _____

Name of the Organisation _____

Office / Business address _____

_____

Phone No. _____ Mobile _____ E-mail _____

_____

Permanent Address _____

_____

Phone No. _____ Mobile _____

Present Address _____

_____

Phone No. _____ Mobile _____

Medical Information: Does the child have some special needs?

If yes, give details _____

(Please attach supporting documents)

Information about siblings

Name _____ Age _____ Class _____ School _____

Name _____ Age _____ Class _____ School _____

Would you like to avail the school transport facility? Yes ☐ No ☐

Date _____

_____

Signature of Parent / Guardian

CERTIFICATE FROM PARENTS

- I/we hereby certify that all the information given is correct to the best of my/our knowledge.
- I understand that the submission of application form does not guarantee admission. It will depend on the availability of seats and will be as per the guidelines of Directorate of Education, Delhi.
- I promise to abide by the rules & regulations of the school.
- I_____father / mother of_____hereby declare that the information given by me is based on facts and authentic records. Admission of my child may be cancelled if any information is found to be false.

Date:.....

.....
Father's / Guardian's Sign.

.....
Mother's / Guardian's Sign.

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Registration No._____

_____

Name of the child_____

_____

S/o/D/o_____

Applied for class_____

Documents to be given:

1) Self attested photocopy of Date of Birth Certificate ☐
2) Self attested photocopy of Proof of Residence (either of these) ☐
   a) Ration card issued in the name of parents (Mother/Father having name of child)
   b) Domicile certificate of child or of his/her parents
   c) Voter I-card (EPIC) of any of the parents
   d) Electricity bill/MTNL Telephone bill/Water bill/Passport in the name of any of the parents or child
   e) Aadhar card/UID card issued in the name of any of the parents
3) 1 passport size photograph of the child (to be pasted in the box given on the form) ☐
4) 1 passport size photograph of each of the parent. (to be pasted in the box given on the form) ☐

Auth. sign.

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